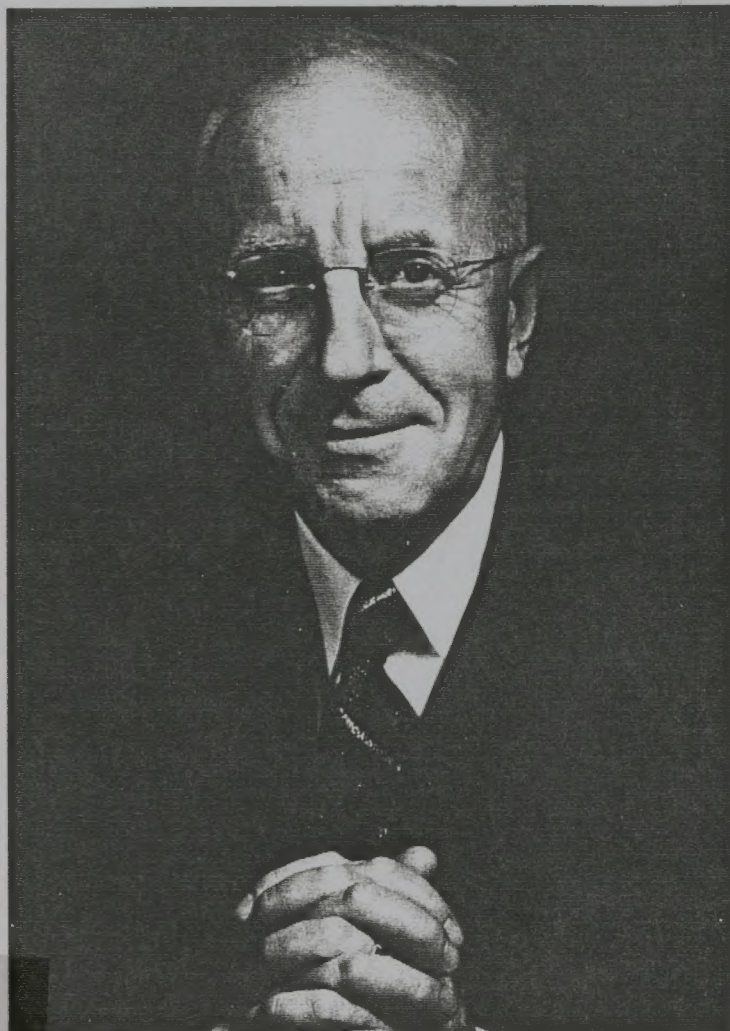


# WILLIAM FULTON GILLESPIE

BA, MA, MB, MS, FACS, FRCSC

1891—1949



**REF**

Robert A. Macbeth MD, MSc, DSc (hon), FRCSC, FACS

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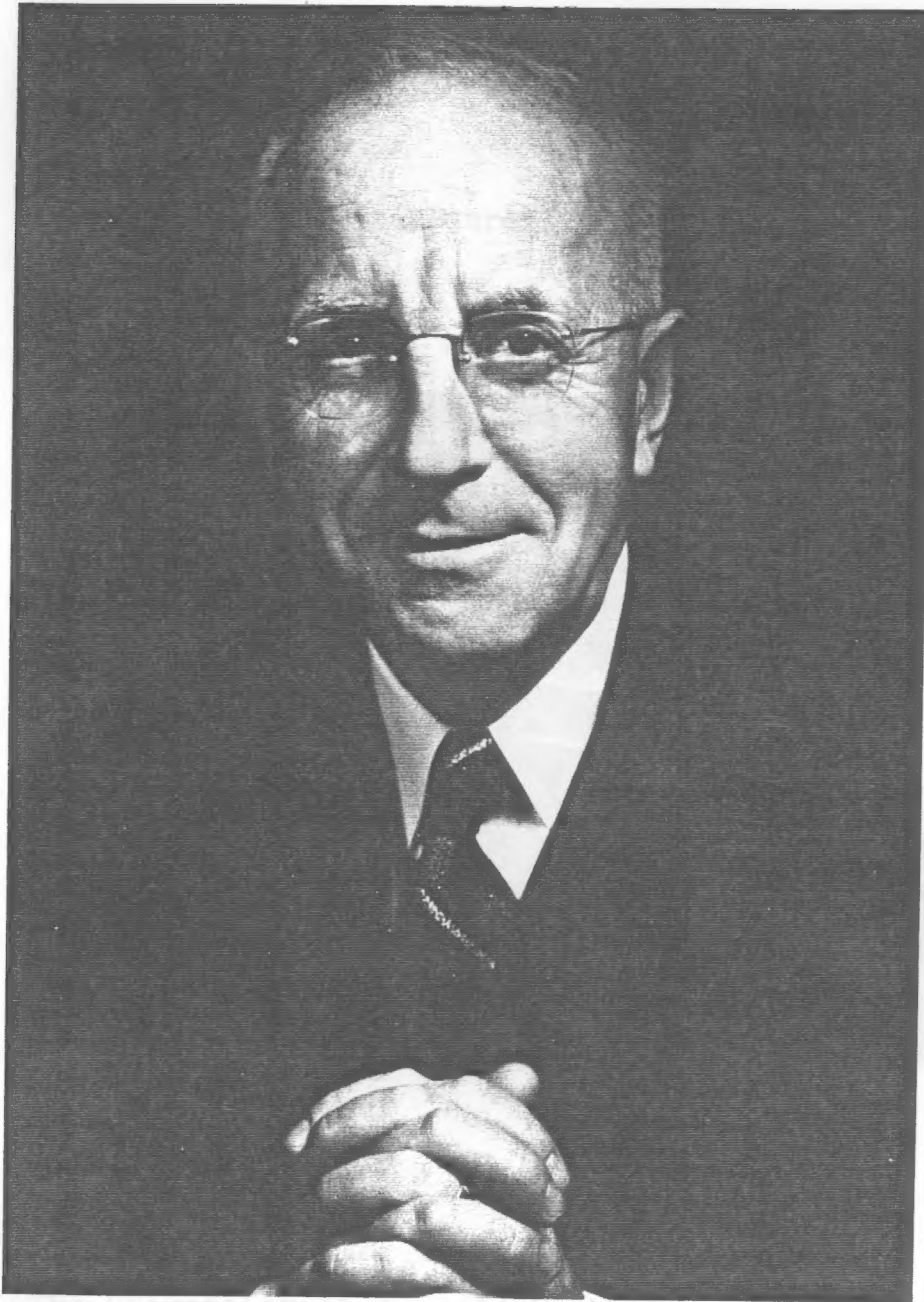
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Figure 7: Gillespie around the time of his appointment as Professor of Surgery, circa 1939 (University of Alberta Archives).

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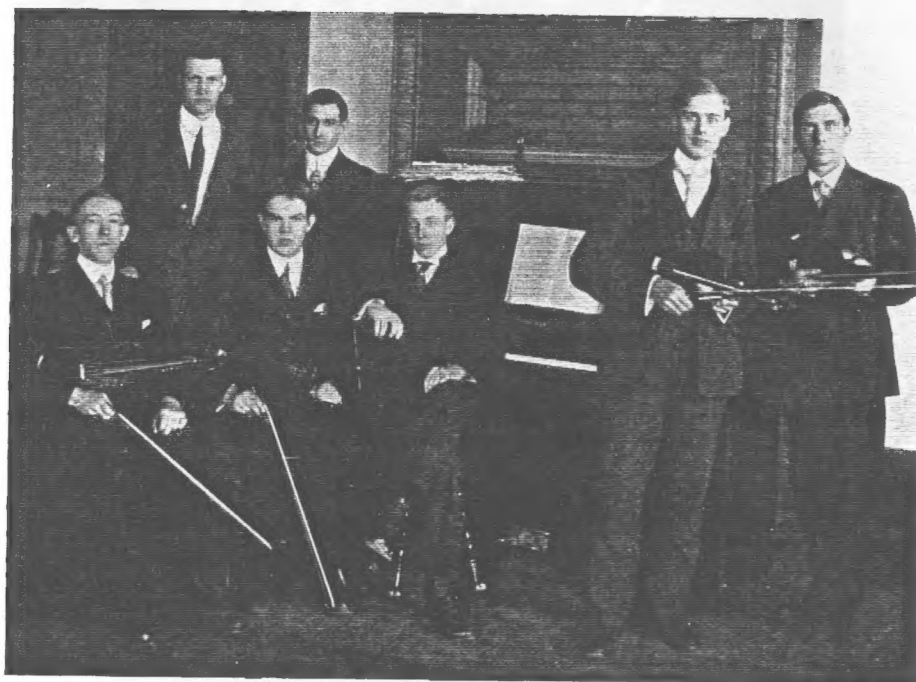


Figure 1



Dr. William Fulton Gillespie at the time of  
his Presidency of the Royal College of  
Physicians and Surgeons of Canada, circa  
1947. © Yousuf Karsh.

Figure 2



The University of Alberta Orchestra, 1912.  
Gillespie is seated at the piano. University  
of Alberta Archives.



Figure 3



Third year class in the Faculty of Medicine,  
University of Alberta, 1917-1918. Gillespie  
is in the front row, right. Faculty members  
in the middle row from left to right are: J.  
Bertram "Bert" Collip (Physiology and  
Biochemistry), Daniel "Daddy" G. Revell  
(Anatomy), Gordon C. Gray (Surgery) and Heber  
C. Jamieson (Bacteriology). University of  
Alberta Archives.

Figure 4



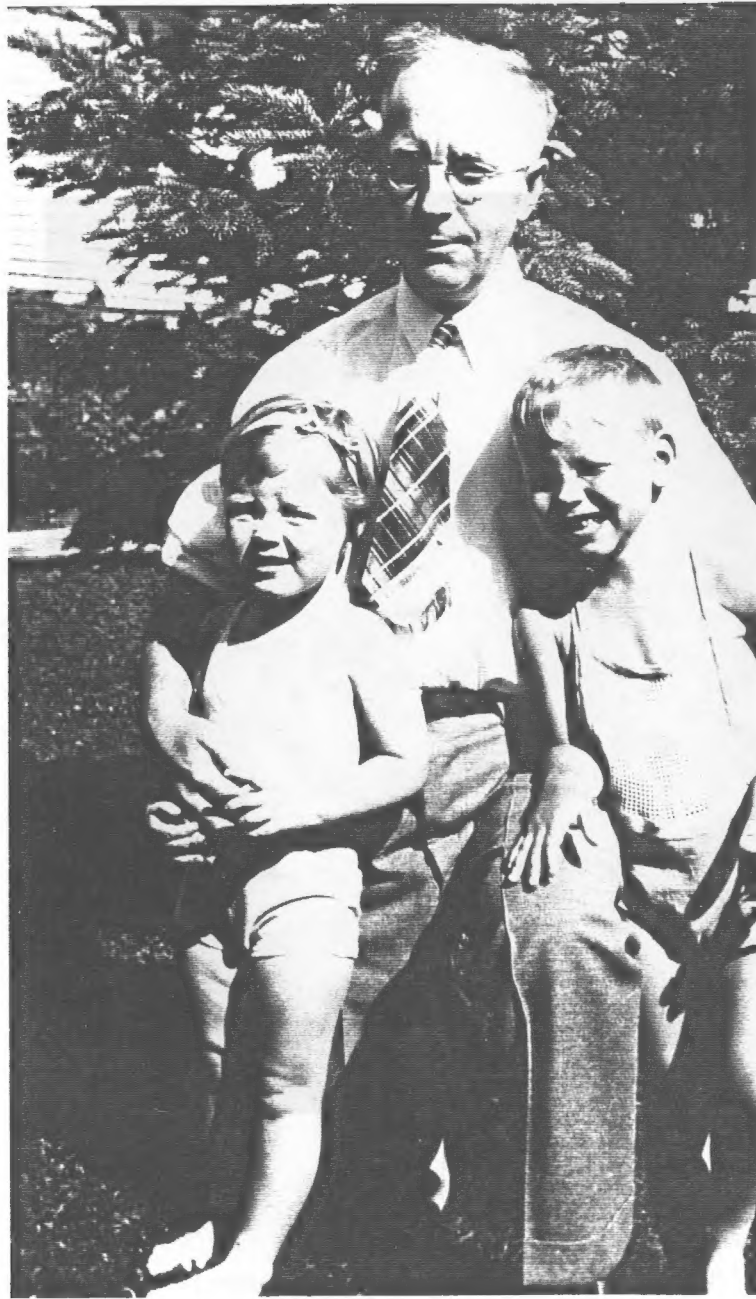
Gillespie, medical graduation, University of  
Toronto, 1920. College of Physicians and  
Surgeons of Alberta.

Figure 5.



Photo-montage of the Gillespie family, circa 1930. Ethel E. (Corey) Gillespie lower right, W. Fulton Gillespie lower left, William A. Gillespie above. Courtesy of William A. Gillespie.

Figure 6



Fulton Gillespie with daughter Margaret, left  
and son William "Bill" right, circa 1934.  
Courtesy of William A. Gillespie.



Figure 7



Gillespie around the time of his appointment  
as Professor of Surgery, circa 1939.  
University of Alberta Archives.

Figure 8



Gillespie relaxing at his Steinway baby grand piano, circa 1945. University of Alberta Archives.

William Fulton Gillespie  
B.A., M.A., M.B., M.S., F.A.C.S., F.R.C.S.C.  
1891 - 1949

With a note on Pre-Gallie Course Surgical Specialty Training at  
the University of Toronto

Robert A. Macbeth

Canadians, especially young Canadians, seldom give thought to our relative youth as a quasi-European nation and frequently fail to appreciate the dramatic changes that have occurred in Canada during the past century. Western Canadian academic surgery is an exemplar of the latter fact and its history is a revealing reflection of a transformation that has occurred within living memory of some of our senior medical colleagues.

Alberta was created as a province from a part of Canada's vast Northwest Territories only in 1905 and introduced legislation to establish a provincial university at the first session of the legislature in the following year.<sup>1</sup> In 1908 the University of Alberta in Edmonton enrolled its first students<sup>2</sup> and, in 1913, offered the first year of the standard five year medical program which was offered by established Canadian medical schools at that time<sup>3</sup>. By 1915 the first three years of the medical program were offered and arrangements made for the final two years to be taken either at McGill University or the University Toronto.<sup>4</sup> In 1917 the University of Toronto served notice that it would be increasing its medical course to six years "after the close of the War."<sup>5</sup> This change was initiated in 1919.<sup>6</sup> Since McGill University had made a similar decision,

the University of Alberta provided the fourth year of the six year course starting in 1919.<sup>7</sup> Finally, in 1922, a hospital having been acquired for clinical teaching,<sup>8</sup> the decision was taken at the University of Alberta to establish clinical departments, appoint professors in the clinical disciplines and offer a complete medical course leading to the Doctor of Medicine degree. The fifth year was offered in the 1923-24 session<sup>9</sup> and the sixth, and final, year in the 1924-25 session.<sup>10</sup> The first class of eleven students to complete their course in Alberta received the degree of Doctor of Medicine on May 15, 1925.<sup>11</sup>

The choice for the leadership of the new Department of Surgery at the University of Alberta in 1922 was Frank Hamilton Mewburn, probably the preeminent pioneer surgeon in the province at the time. Dr. Mewburn, or 'the Colonel' as he was called, was a self-trained surgeon who learned his craft by operating, under unbelievably primitive conditions, in prairie homes and outpost hospitals, and as a military surgeon during the North-West (Riel) Rebellion and the First World War.<sup>12</sup> His successor, Alexander Russell Munroe, was cut of the same cloth, a surgeon who learned his surgery by doing it at the Duchess of Connaught's Canadian Red Cross Hospital at Taplow, England (later to become No. 5 Canadian General Hospital) during the First World War.<sup>13</sup> The Mewburn-Munroe period, from 1922 to 1939, therefore represented an interval during which the leadership of the Department was provided by self-trained, highly competent, technical surgeons

who lacked any semblance of what we, today, would consider adequate academic preparation for their roles.

Neglecting, for the moment, the period from 1939 to 1950, a very different type of leadership appears on the academic surgical scene at the University of Alberta on the latter date in the person of Walter Campbell Mackenzie. While a product of the Mayo Clinic Fellowship program, rather than the university-based, highly structured, type of academic surgical program that produced his successors, Dr. Mackenzie's training included those features considered essential for one aspiring to academic surgical leadership, namely, supervised progressive responsibility for surgical care in a centre of medical excellence and an exposure to surgical investigation.<sup>14</sup> The individual who filled the professorial role for ten of the years between 1939 and 1950, which marked a transition period in the type of leadership sought by a maturing Western Canadian medical school, was William Fulton Gillespie, the subject of this paper. However, in order to complete the succession of the surgical professorship at the University of Alberta between 1922 and 1960, the name of Dr. Howard Havelock Hepburn requires mention. He served during the interim between 1949 and 1950 following the sudden death of Dr. Gillespie. The story of his remarkable life and career remains to be recorded.

William Fulton Gillespie, the second son of Alexander



Gillespie and Sara Campbell, was born in Manilla, 19 kilometers west of Lindsay in Central Ontario, on May 22, 1891.<sup>15</sup> Until his marriage in 1925, he went by the nickname of Bill but once established in practice in Edmonton he was known as Fulton. Since the latter is the name by which his friends and medical associates knew him throughout his professional life it will be used in this paper.

Two other children were born to Sara and Alexander Gillespie, Alistair Campbell Gillespie, born at Manilla on 11 August 1886 and therefore Fulton's senior by five years, and Annie (Mrs. C.I. Grierson) who was three years his junior.<sup>15</sup>

Alexander Gillespie, Fulton's father, was born on a farm near Peterborough, Ontario, on February 5, 1854. Initially apprenticed as a wood-worker, he later entered Trinity Collge Medical School in Toronto in 1880 and graduated with honours in 1884. In 1885, after a year of post-graduate study in Edinburgh, he established practice in Manilla. In 1895 he moved to Lindsay where he practiced for 11 years before establishing a permanent home in Edmonton in 1906.<sup>16</sup> Fulton Gillespie would therefore have been four years old when the family moved to Lindsay, and 15 when he moved, with his family, to Edmonton.

In relation to Fulton Gillespie's public and high school education one fact only can be established, namely, that he

graduated with Standard VIII standing (later designated Grade XII) from the Edmonton High School in the spring of 1910.<sup>17</sup> His obituary states, however, that he received his public school education in Lindsay and his high school education in Edmonton.<sup>18</sup>

His school days in Lindsay were marred by a succession of chest problems. When he was six years old he suffered from a right sided empyema the surgical drainage of which was delayed with the result that repeated drainages were required over the next nine years.<sup>19</sup> It was Fulton Gillespie's wife's understanding that the family moved to Edmonton in 1906 because of Fulton's health problems.<sup>20</sup> His children were led to believe he had only one lung and, because of the scarring and deformity of his right chest assumed, erroneously, that his right lung had been removed.<sup>21</sup> As a result of his chest infection and its surgical treatment, his right shoulder was noticeably depressed with the result that his suit coats required to be specially tailored and, in the hospital, he was immediately recognizable because of his posture, his white coat seeming to be about to slide off his low right shoulder at any moment. It was presumably this disability that prevented his military service during the First World War although the move to Edmonton seems to have been highly beneficial since he required no further therapy following his arrival in that city. In fact, his health proved to be such that he was the star fullback on the Edmonton High School association football team, leading the team to victory

over their Strathcona rivals, only to lose the Rutherford cup game to the Red Deer High School team in 1910.<sup>22</sup>

In 1910 the Alberta Departmental Examinations extended from June 27 to July 13<sup>23</sup> and between their completion and commencing studies in the Faculty of Arts at the University of Alberta in the fall of 1911, Fulton Gillespie attended Normal School in Calgary and probably also taught in public schools in the province.

The first normal (teachers' training) school in Alberta opened in Calgary on 3 January, 1906.<sup>24</sup> Two four-month courses were offered each year. Fulton Gillespie registered, for a fee of \$15.00, in the first class of 1911 which ran from 3 January to 28 April.<sup>25</sup> It is interesting to note that, in 1916, "only 5.49% of Alberta's 99,000 school children were to be found above the eighth grade . . . . Only 541 students, 0.55%, attended at the grade XII level."<sup>26</sup> Fulton was, indeed, a member of a unique group in his day. As a holder of a standard VIII (grade XII) level high school diploma, he was eligible to enroll in the program leading to the first class interim teacher's certificate which was valid for a year and convertible to a permanent Teachers' First Class Professional Certificate after a year of successful teaching.<sup>27</sup>

John Chalmers provides an interesting insight into the teaching profession in Alberta at the turn of the century.

Of course, the brief tenure of the rural teacher was a by-word in western Canada during and previous to World War 1. Some teachers left their little schools after a few months, because their school districts ran out of funds and were no longer able to pay them. Some pert young school mistresses departed because they married local farmers - and others because they didn't. If a girl hadn't acquired an engagement ring by the end of her first year of teaching, she usually left for pastures greener. Nor did the young men in the one-room schools have any deeper commitment to their calling. Sometimes engaged only for the summer months, they were often taking time out from their own studies in order to earn and save enough money to continue towards their chosen careers in agriculture, business, law, medicine, or the Christian ministry.<sup>27</sup>

Chalmers also notes that: "In fact, by 1919 the government, to keep the rural schools operating, was forced to grant teaching permits to university and even high school students."<sup>28</sup>

There is unconfirmed evidence that Fulton Gillespie taught public school in northern Alberta during the 1910-1911 academic year. A newspaper clipping in his scrap-book records that: "The Beaver Hills school at Agricola is already preparing a concert to be held, weather permitting, on December 20. For some time Mr. Gillespie has been drilling the pupils in dialogues, choruses and

skits and by the rehearsals held the concert bids fair to be up to the high standard of excellence attained in past years." A review of Gillespie's activities subsequent to registering for his B.A. in the fall of 1911 leads one to conclude that there is no time when he could have taught school for a period of some weeks or months prior to Christmas except for the fall and early winter of 1910. One is therefore led to presume that he was permitted to teach school on a basis of his standard VIII high school diploma prior to going to normal school. There is also similar unconfirmed evidence that he taught school in the Waskatemou School District (after 1921 referred to as Waskatenau) but since there is nothing to indicate the time of year, this could have occurred on completion of his normal school course or during the summer while attending the University of Alberta.

In the fall of 1911 Gillespie registered in the Faculty of Arts at the University of Alberta. Normally a four year course, he was eligible to enter at the second year level by virtue of his having completed grade XII." Since student grades were published both in the student newspaper, the Gateway, and also in the University calendar for the subsequent year, the courses he took and the grades he achieved are available. In all three years he took appropriate level courses in English, French, History and Chemistry as well as single year courses in Biology, Psychology and Latin. His grades were consistently in the mid to high class II range (65% to 85%) with a number of class I marks



and an occasional class III.<sup>11</sup> He graduated, B.A., in 1914 without having gained any academic awards, but with an impressive listing of extra-curricular achievements. While a pre-medical exposure to the humanities is not unusual today and a university level degree in arts, or more commonly in the sciences, is now a common prerequisite for entry into the medical course, this was not true in Gillespie's day. The course of studies and activities he pursued prior to, and even after, studying medicine doubtless contribute to and explain some of the features of his life as a surgeon.

In the special convocation issue of the Gateway in 1914 the text which accompanies his photograph reads as follows.

It is said that "music charms the savage breast"; as President of the Glee (Club) '12-'13 and by his readiness to officiate at the piano, W. F. Gillespie has gone to prove this statement. As Secretary of the "Lit." (Literary Society); President of the Glee (Club); Executive of the Students' Council, '12-'13; as Vice-President of the Students' "Y" (Young Mens' Christian Association), and President of the Graduating Class, '13-'14; and President of the "Y" for the ensuing year, Gillespie has given evidence that he realizes that University life is many-sided. Ontario born, he intends devoting himself to educational work in the West.<sup>12</sup>

In the fall of 1914, unable to serve in the Canadian army because of his childhood chest problem and not yet prepared to commit himself to a medical career, Gillespie, now 23, decided to accept a position as a public school teacher in Dawson City in the Yukon. In June, 1915, the Dawson City Daily News carried an article which reads, in part, as follows.

Mr. Gillespie has been here a year and has proven one of the most efficient instructors and one of the most energetic ever in the city. He has been indefatigable in assisting in public movements, particularly those to which the young have been identified. He was entitled to the chief credit for the splendid success of the public school concert on the twenty-fourth of May; has had charge of the Boy Scouts all winter, has been a leader in athletics; and is one of the best players of the Dawson baseball league. He is a splendid musician and has popularized singing among the children, and, in a word, is an all-round live wire, one who does things and sets a good pace in wholesome diversion for the young and for this reason his young friends and others hope he will return.<sup>11</sup>

He did return for a second year and again received complimentary comment in the Dawson City Daily News. At the end of his second school year, on June 26, 1916, as scout master he took his scout troop for a two week camping experience at a site

on the Klondike River, an expedition recorded in almost daily detail in the paper."<sup>1</sup> On his final departure from Dawson City on July 11, 1916, the Daily News carried another tribute to Gillespie, much like that which marked the end of his first year, under the headline: "Prof. Gillespie to leave on boat tonight."<sup>2</sup>

Early in his second year in Dawson City Fulton Gillespie decided to pursue a career in medicine, or at least explore the possibility of doing so. The minutes of the meeting of the Committee on Applications and Memorials at the University of Toronto on January 6, 1916, record that a letter had been received from W. F. Gillespie of Dawson, Yukon Territory, outlining his academic background and asking "what standing would be allowed him and if it would be sufficient for entrance into Second Year."<sup>3</sup> Further information was requested and was provided since, at a subsequent meeting of the Committee on September 19, 1916, "it was determined that he might enter Second Year, but that he would be required to take Physics of the First Year along with his Second Year work."<sup>4</sup>

Following his successful completion of second year medicine at the University of Toronto, Gillespie transferred, for reasons that are not apparent, to the University of Alberta for his third year<sup>5</sup>, the most advanced year offered by the latter university at that time.<sup>6</sup> While we know nothing of Gillespie's extra-curricular activities at the University of Toronto, Corbet

records that he served on the executive of the Medical Students' Club at the University of Alberta during its 1917-1918 inaugural year."

Given *ad eundem* status for his year in Alberta," he returned to the University of Toronto in the fall of 1918 and completed his medical course in 1920 graduating Bachelor of Medicine (M.B.)." The necessity that he complete a second application form for the University of Toronto in 1918, which includes the marks he obtained in his third year in the Faculty of Medicine at the University of Alberta, permits one to conclude that he was a considerably better than average student academically."

Normally graduates in medicine in 1920 would either follow this with a period of hospital internship or go immediately into practice" but again Gillespie's ambivalence to medical practice, or at least the nature of that practice, manifests itself in his return to the University of Alberta. There he registered as a graduate student in the Faculty of Arts leading to a Master of Arts degree in Psychology" and obtained a one-year appointment as lecturer in the latter Department." This deviation seems inconsistent with a career dedicated to the discipline of surgery and suggests that Gillespie was still undecided as to his ultimate career choice. Was he still considering a career as a teacher, possibly in the humanities, or perhaps practice as a

psychiatrist? Sadly we will never know. In any event, during this year he decided to pursue his medical studies and, having received his M.A. in 1921<sup>15</sup>, he returned to Toronto as a rotating interne at the Toronto General Hospital.

At this point it is appropriate to leave the Gillespie story momentarily and examine early surgical training at the University of Toronto. Looking ahead, we could note that Fulton Gillespie received a Master of Surgery degree from the University of Toronto in the spring of 1929. However, Dr. William Edward Gallie became Professor of Surgery at Toronto only in May 1929 and inaugurated his comprehensive, progressive, surgical residency training program (the "Gallie course") only in 1931.<sup>16</sup> Conventional wisdom would have us believe that successful completion of the Gallie course and the University of Toronto Master of Surgery degree are essentially one and the same thing. How then did Gillespie receive this degree in 1929?

In order to understand the development of surgical training at the University of Toronto it is necessary to briefly review the convoluted history of medical instruction in the city of Toronto.<sup>17</sup>

Up until 1849 medical education in the Toronto area was offered by what, for simplicity, we may refer to as the "Rolph"<sup>18</sup> and the "Strachan"<sup>19</sup> medical schools in deference to their



founders and promoters. However each of these schools, at various times in their history, went under a variety of names. In that year, as a consequence of the "Baldwin Act"<sup>50</sup> King's College Medical School (the Strachan school) was forced to surrender its charter and was reconstituted as the non-sectarian University of Toronto Faculty of Medicine. Medical instruction at the University of Toronto was, however, short-lived since, as a result of the "Hincks Act" of 1853, the University of Toronto Faculty of Medicine was transformed into an examining and degree granting institution only while its medical teaching functions were returned to the church and non-denominational colleges.<sup>51</sup>

In 1874, four years after Rolph's death, his University of Victoria Faculty of Medicine amalgamated with the breakaway Toronto School of Medicine under Aikins.<sup>52</sup> However, as the end of the century approached the proprietary schools proved unable to provide the type of laboratory experience and instruction in the basic medical sciences that was required by the University of Toronto as the examining body. As a result, in 1887, the Toronto School of Medicine discontinued its teaching and its faculty reinitiated medical instruction as the University of Toronto Faculty of Medicine under Aikins as dean.<sup>53</sup> Finally, in 1903, Trinity College Medical School (the continuation of the Strachan school) was forced, reluctantly, to close and amalgamate with the University of Toronto Faculty of Medicine. This brought all medical instruction in Toronto under a single administration.

While most medical schools in North America awarded the doctorate in medicine (M.D.) as the qualifying degree in medicine, the University of Toronto initially followed the practice initiated in medieval European medical schools<sup>53</sup>, and perpetuated in some European countries to this day, of awarding the bachelor of medicine (M.B.) degree as its qualifying degree. In this type of program the M.D. degree was reserved for individuals who pursued further study involving a period of research and the submission of a thesis.<sup>54</sup>

The first mention of the need for formal postgraduate degree courses in the clinical disciplines at the University of Toronto came as a proposal at a meeting of the Faculty of Medicine Council in 1916. Professor Wishart's motion stated "that the time has arrived for the establishment of full Postgraduate courses in various branches of medicine which shall lead to a degree and which shall have for their object the training for medical practice of fully equipped and properly certified specialists and investigators, and possibly teachers of medicine."<sup>55</sup>

It is not clear exactly when the Council acted on Professor Wishart's motion. The earliest extant minutes of the Committee on Postgraduate Studies are, however, dated November 6, 1919. At a meeting of the Committee on October 19, 1920, a Subcommittee on Higher Degrees in Medicine was established to work out the

details of a degree course of advanced work in medicine and surgery." Initially the members of the Subcommittee were Professors V.E. Henderson (Pharmacy and Pharmacology), D.A.L. Graham (Medicine) and W.E. Gallie (Surgery) with additional members named a month later.

Over the course of the following year a succession of interesting progress reports were received by the parent committee from its Subcommittee on Higher Degrees in Medicine. The final report of the subcommittee was received by the Committee on Postgraduate Studies on October 5<sup>th</sup> and, as amended at the meeting on December 2, 1921,<sup>st</sup> was accepted and forwarded to the Faculty of Medicine Council for action. The essential features of the course included:

1. A degree in Medicine from a recognized University and one year of rotating internship were identified as entrance requirements for the course.
2. The course was of three calendar years duration to consist of: a) a clinical year as a senior intern; b) a laboratory year with a major commitment to one, and a minor commitment in two additional, disciplines; and, c) a final clinical year in the selected clinical subject.
3. Specified periods of time in general practice or in special

work might be accepted in lieu of some of the required training.

4. The examination and thesis requirements were detailed.
5. It was agreed that the higher degree in medicine would be Doctor of Medicine (M.D.) and in surgery would be Master of Surgery (M.S.).<sup>51</sup>

At a meeting of the Committee a week later, on December 9, 1921, a communication was read from Professor J. Playfair McMurrich, Department of Anatomy, raising what would appear to be a very valid objection to the proposal, as follows:

My objection (to the use of the degree M.D. for the men who have taken the proposed postgraduate course in medicine) is based on the fact that the M.D. degree is practically universally used on this Continent (except in Toronto) as the graduating degree. If we use it for a course involving at least three years of postgraduate work, we are doing an injustice to the men who take that course, since it places them on the same footing as men who have merely completed the undergraduate course. It is idle to say that we can establish a new standard by which the value of the degree may be estimated - it is a degree whose significance has been determined in this Continent very definitely by long

and almost universal usage. The men who take the proposed postgraduate course will have had a special and distinctive training and they should be granted a special and distinctive degree ...."

It is a sign of the effectiveness of the feminist movement in recent years that today one unconsciously finds the sexist use of "men" in such a statement as repugnant and unacceptable whereas in 1921 it is doubtful that such a letter would have stimulated any reaction in this regard.

The final decision of the Committee, following a lengthy discussion was, however, to reaffirm that the higher degree in medicine should be the M.D. while at the same time confirming that the degree in Surgery, and in Obstetrics and Gynecology, should be the Master of Surgery but changing the designation of the latter, without recording the explanation, to Ch.M."

This program, which now included the disciplines acceptable for study in the laboratory year, was submitted to the Board of Graduate Studies for approval and subsequently listed in the University calendar as being offered in the 1922-1923 academic year."

On January 30, 1923, the Subcommittee on Higher Degrees in Medicine having completed its task and been disbanded, the



Committee on Postgraduate Studies established two new Subcommittees, one in Medicine and one in Surgery to "draw up details of the courses . . . . (and further proposed) that applications received be forwarded to these subcommittees."<sup>12</sup> The Surgery Subcommittee consisted of "Professors C.L. Starr (chairman of the Department), W. E. Gallie, W.B. Hendry (Obstetrics and Gynecology) and Dr. E.S. Ryerson."<sup>12</sup>

At a meeting of the Committee on Postgraduate Studies on May 22, 1923, the requirements for the degree of Master of Surgery (Ch.M.) were further refined on a basis of a report from the Surgical Subcommittee dated April 27, 1923.<sup>13</sup> The first clinical year required to be served as "a house-surgeon" and the second clinical year as "a senior house surgeon" on a "Surgical Division in a teaching Hospital acceptable to the School of Graduate Studies." For the laboratory year it was recommended that the "major (subject) for the Ch.M. shall be Pathology and one of the minors, Anatomy; in the latter he shall be required to dissect the human body." At the end of each of the three years the student was required to present a certificate to the School of Graduate Studies from the Surgeon in charge of the service, or the Heads of the (Laboratory) Departments, in which the student served, stating: "the nature and details of the work done and the degree of efficiency with which it has been carried out." At the conclusion of the Laboratory year the student was also required to pass "a written and oral examination in the following

subjects: 1. Pathology including Bacteriology, 2. Anatomy and 3. Principles of Physiology." In addition, at the end of the three years of study the final examination was defined as consisting of: "I. a thesis, and II. written and oral examinations in 1. General and Operative Surgery, 2. Pathology and 3. Anatomy."

These requirements for the higher degrees in medicine and surgery obviously constituted formidable obstacles to registration. Registrants were few, and fewer still were those who successfully completed the entire program.

In 1927 the Faculty of Medicine Committee on Postgraduate Studies proposed, for reasons that are not recorded, that the requirements for the degree of Master of Surgery be reduced to two clinical years and that the laboratory year be eliminated. The requirements for the two clinical years remained essentially as before although it was now required that "one year of the course must be taken in the University of Toronto." Although no laboratory year was required the student must, however, pass a written and oral examination in anatomy and physiology at the end of the first year. The thesis and examination requirements at the end of the course remained as before. These changes were incorporated into the 1927-1928 University calendar.

Finally, in 1930, the Committee on Postgraduate Studies

decided to recommend, again without recording the discussion leading to the decision, "that the advanced degree in surgery offered to graduate students should be Master of Surgery, designated by 'M.S.' rather than Master of Surgery 'Ch.M.' as at present."

Since the point was made at the beginning of this account that it focused on pre-"Gallie Course" surgical training at the University of Toronto it is appropriate to note that, although Dr. Gallie was not yet Professor of Surgery during these developments and had not initiated 'his' program, he was very much a part of the planning for, and the introduction of, the program herein described. While not initially a member of the Committee on Postgraduate Studies of the Faculty of Medicine he was so listed by the meeting of April 4, 1923. He was, however, a member of the Subcommittee on Higher Degrees in Medicine when it was established on October 19, 1920, and of the Subcommittee on Surgery in 1923 following the disbanding of the former subcommittee. By December 2, 1930, he was identified as the chairman of the Committee on Postgraduate Studies.

In regard to the actual initiation of the 'Gallie Course' Cosbie reports:

It was in order to meet this situation (Royal College recognition) that W.E. Gallie, with the collaboration of the Departments of Physiology, Anatomy and Pathology, organized

an integrated plan for young surgeons in all the major fields of surgery. In his 1932 report to the Dean of Medicine he announced: This year has seen the establishment in this School of a definite plan of postgraduate training for surgeons. Hitherto it has been impossible for a graduate to receive adequate training here in General surgery, and he has been forced to seek it in hospitals abroad."

Dr. Gallie's remarks may well represent a degree of disillusionment with the Faculty of Medicine's initial experience with its program of postgraduate training in surgery between 1922 and 1932. That Fulton Gillespie also had some concerns about the acceptance of the training he received is apparent from his early correspondence with the Royal College."

As a final note to this diversion into the early history of postgraduate surgical training at the University of Toronto, and particularly in the light of Professor McMurrich's 1921 comments in relation to the M.D. as a postgraduate degree which were previously noted", it is worthy of record that, in the 1929-1930 Calendar, the following announcement appears.

The authorities of the University of Toronto have revised the degree in Medicine so that students upon graduation in the future shall receive the degree of Doctor of Medicine

(M.D.) instead of Bachelor of Medicine (M.B.). This amendment in the regulations has been made retroactive so that every graduate in Medicine of the University of Toronto who now holds the degree of Bachelor of Medicine is entitled on application to be admitted without examination to the degree of Doctor of Medicine (M.D.) on the payment of a fee of Ten Dollars (\$10.00)."

Whether "Mr." Gillespie was aware of this amendment we do not know. There is, however, no evidence to suggest he paid his ten dollars and became a doctor.

During his year in the Department of Psychology at the University of Alberta, which culminated in his receipt of the M.A. degree in the spring of 1921, Gillespie made a decision to pursue a career in clinical medicine. Between July 1921 and August 1924 he served in the Toronto General Hospital, in succession, as a rotating intern, a senior intern in surgery and a senior intern in pathology, each for one year.<sup>11</sup> As a rotating intern during the 1921-1922 house staff year it is likely that Gillespie would become aware of the announcement in the University of Toronto calendar for the 1922-1923 academic year regarding postgraduate training and, having by now decided on a career in surgery, patterned his subsequent two years, one in surgery and one in a laboratory science, in accordance with the requirements for the Ch.M. degree. Why he withdrew from the

program at the end of the 1923-1924 house staff year when only one more year remained to complete the course will never be known for sure, but Ethel Evelyn Corey, who later became his wife, may provide a clue. In a tribute to her husband after his death she wrote that on their first date, when she was a student nurse: "Fulton, we called him Bill, asked me to go to Sunnyside with another nurse and intern to dance. None of us had any money so we couldn't get anything to eat, and noone is more hungry than a nurse in training."<sup>12</sup>

Whatever his reasons Gillespie returned to Edmonton in the summer of 1924 and entered general practice with his father. Ethel Corey must have left a powerful impression him, however, since "he showed up (in Toronto) at the (Ethel Corey's) nursing graduation dance" in 1925 and decided to relocate his practice to Lindsay where he had gone to public school.<sup>12</sup> Miss Corey, meanwhile returned to Trenton, her home town, "as the Victorian nurse in the area."<sup>12</sup> Their separation was short lived, however, since that fall Fulton Gillespie received word that his father had suffered a stroke. The news was accompanied by an urgent appeal that he return to Edmonton and take over his father's practice. This time he decided not to go west without Ethel Corey. But there was a problem since it took seven days to get a marriage license. There was, nevertheless, also a solution. Ethel's father was the mayor of Trenton and a license was produced forthwith. Ethel and Fulton were married on September

11, 1925<sup>13</sup>, and left immediately by boat for Edmonton. That was, at least in part, possible between the 1920s and 1965 when Canada Steamship Lines offered passenger service between Montreal and Fort William (now Thunder Bay) at the western extremity of Lake Superior. As their quickly arranged honeymoon the Gillespies boarded the 'Noronic' at Sarnia, steamed north on Lake Huron, passed into Lake Superior by the locks at Sault Ste. Marie, and crossed the latter to reach Fort William where they completed their journey by train.<sup>14</sup>

Gillespie's life in Edmonton between September 1925 and 1929, when he received his Master of Surgery degree from the University of Toronto, must have been a busy one. His father, Alexander Gillespie, never practiced again and Fulton carried on the extensive general practice that his father had built up over the preceding nineteen years.<sup>20</sup> In 1925 he was appointed an Instructor in Clinical Surgery in the Faculty of Medicine at the University of Alberta<sup>15</sup> and, in 1926, as a Visiting In-Door Physician at the University Hospital.<sup>16</sup> In September, 1926, he presented his first paper, on Blood Transfusion, at the Calgary meeting of the Alberta Division of the Canadian Medical Association.<sup>17</sup> The following year he served as the secretary-treasurer of the Edmonton Academy of Medicine<sup>18</sup> and the Academy's historian noted that "during 1927 the Academy first heard about blood matching in an excellent presentation by Dr. W. Fulton Gillespie, an extremely erudite surgeon at the University".<sup>19</sup> In

1927 he also became a member of the Senate of the University.<sup>19</sup>

However, while developing a role for himself in the University and local medical professional organizations, Gillespie still had, as his major objective, the completion of the Master of Surgery course at the University of Toronto. With only one year of post-intern surgical training he obviously required to request the invoking of the clause that "three years or more in general practice may be accepted as equivalent to one of the clinical years of the course."<sup>20</sup> In addition the unfulfilled requirements that he submit a thesis and pass written and oral examinations in General and Operative Surgery, Pathology and Anatomy presented a significant challenge. The fact that he had completed a year of his postgraduate training in Toronto as a senior intern in pathology and that, from 1926 to 1930, he served as a demonstrator in surgical pathology at the University of Alberta<sup>21</sup> doubtless provided him with confidence in that area. His preparation for the anatomy examination included an "extra year of dissection in Alberta"<sup>22</sup> and, in 1929, just before his examination, he went to Chicago to take a "laboratory in surgical technique"<sup>23</sup> to prepare himself for the examination in operative surgery.

The Faculty of Medicine at the University of Alberta in the 1920s was hardly a centre of research excellence and the preparation of a thesis doubtless presented Gillespie with an



enormous challenge. He selected as his research topic "Bilirubinaemia", his specific objective being to explore the usefulness of two recently described tests, the Van den Bergh reaction (1913) and the Icterus Index (1920), as aids in the differential diagnosis of patients with jaundice. An exhaustive tabulation of the available literature on bile pigment metabolism introduces his clinical investigative study. Since most of the literature is in German it was tempting to assume, initially, that this had probably been read only in summary and in English. Dr. Gillespie's daughter assures me, however, that it is a little known fact that he was fluent in German. It is quite possible then, particularly in view of his dedication to scholarship, that these articles were read in the original.<sup>12</sup>

Analyses were carried out in the laboratory of the University of Alberta on some 410 blood samples obtained from patients in four university-associated general hospitals in Edmonton. One assumes that Gillespie personally did both the laboratory procedures and the clinical correlation based on hospital records although the former is not stated precisely and is therefore in doubt. The investigation was plagued by two major problems, blood samples rendered useless because of haemolysis and inadequacy of the clinical charts. He was able, nevertheless, to establish normal levels for the two laboratory tests in some 150 non-jaundiced patients and demonstrate that the Van den Bergh reaction was more sensitive and specific than the

Icterus Index. He was able, however, only to suggest, but not demonstrate conclusively, the usefulness of either test in the differential diagnosis of various diseases in which the hepato-biliary system may be implicated."

His thesis having been submitted and accepted, he travelled to Toronto in 1929, now 38 years of age, to face the ordeal of the prescribed examinations.<sup>20</sup> While there is no detailed record of the result of this encounter, his success in achieving the Master of Surgery (Ch.M.) degree at the University of Toronto in 1929 is well documented."

It has already been noted that, in 1930, the Faculty of Medicine Committee on Postgraduate Studies recommended that the designation of this degree be changed from Ch.M. to M.S.<sup>21</sup>, a recommendation subsequently accepted by the Board of Graduate Studies.<sup>22</sup> At the same meeting of the Committee it was recommended that "Dr. W.F. Gillespie be allowed by the Senate to change his Ch.M. to M.S. if this change is approved." The latter having been approved, the University Senate at its meeting on February 13, 1931, at the request of the Council of the Faculty of Medicine, agreed that Gillespie's degree should be designated M.S."

A search of the records at the University of Toronto leads to the conclusion that, although others registered for the Master

of Surgery program between its introduction in 1922 and the establishment of the "Gallie Course" in 1931, William Fulton Gillespie was the first person to receive this degree from the University of Toronto and the only individual to receive it prior to Dr. Gallie's assumption of the professorship."

It is of interest to note that Gillespie's receipt of his Master of Surgery degree in the spring of 1929 corresponded, in time, to the giving of Royal Assent to the petition of the Canadian Medical Association for the incorporation of the Royal College of Physicians and Surgeons of Canada on 14 June 1929."<sup>1</sup> The College, dedicated to the certification of medical and surgical specialists in Canada and the accreditation of programs of training acceptable for such training included, in section 5 of its charter, provision that: "the Council may, at any time within two years after coming into force of this act, and without examination, select and admit as (Charter) Fellows any duly qualified person domiciled in Canada who have in their opinion given evidence of high ability in one or more departments of medicine."<sup>2</sup>

The medical and surgical specialist community in Canada did not respond to this invitation in great numbers and, by the time of the first Annual Meeting of the College on November 26, 1930, only 22 persons had been admitted to Fellowship under Section 5.<sup>3</sup> With less than six months of the honeymoon period remaining

the Council of the College, concerned over the meager response, sent a letter to every registered practitioner in Canada in January 1931 again drawing their attention to this provision.<sup>10</sup> Gillespie received one of these letters and, as has already been noted, his subsequent correspondence with Dr. T. Clarence Routley, the Registrar-Secretary of the embryo College, is revealing.<sup>11</sup> Gillespie obviously had little confidence in the level of acceptance of his newly acquired Master of Surgery degree by the Canadian medical establishment. He did, however, apply before the deadline date and was one of 220 additional individuals accepted into the College as a Charter Fellow.<sup>12</sup>

Following his receipt of the Master of Surgery degree, Gillespie was appointed an Assistant Professor of Surgery at the University of Alberta<sup>13</sup> and his original Visiting In-door Physician appointment to the University of Alberta Hospital in 1925 was upgraded to Associate Surgeon and Surgeon to the Out-door Service in 1929.<sup>14</sup> By April 1931 he had gained sufficient confidence in his developing role as a surgical specialist that he advised his patients and his medical colleagues that he was confining his practice to surgery,<sup>15</sup> something that was most unusual in Edmonton at that time since virtually all of the city's surgeons continued to practice as general practitioners as a means of supplementing their income from surgery.

As had been expressed by Dr. Gallie in 1932<sup>16</sup>, Canadian

medical graduates who aspired to a career in surgery, and particularly in academic surgery, in the early decades of the twentieth century, generally supplemented what experience they were able to gain in Canada with a period of study in Europe. By 1935, at age 46, Gillespie was finally able to overcome this presumed deficiency in his surgical training. In his successful application to the American College of Surgeons for Fellowship in that organization in February of that year he indicated that he would be "spending March to September 1935 in the Old Country; three months at St. Mark's (Hospital) in proctology and three months in general surgery." The Gillespies were accompanied by their two children (the family was later enlarged to three) and "Bill", the eldest aged six at the time, recalls the north Atlantic crossings and their six months in London." The Gillespie obituaries" record that he served as a clinical assistant at St. Mark's, but it has proven impossible to get further information on this six month interlude."

In 1939, on the retirement of Dr. A.R. Munroe, Gillespie was appointed Professor of Surgery and Chairman of the twenty member Department." The professorship carried with it the concomitant appointment as Director of Surgical Services at the University of Alberta Hospital." These new appointments, superimposed on his clinical surgical practice and, coming as they did at the commencement of the Second World War, heaped a crushing burden on a man dedicated to medical student education as well as the

continuing medical education of the physicians and surgeons of his province and who, in addition, suffered from two chronic debilitating diseases. His chest problem has already been referred to. Added to this, sometime after his marriage in 1925, was the development of insulin-dependent diabetes mellitus.<sup>100</sup> In spite of the fact that Ethel Gillespie weighed everything her husband ate,<sup>101</sup> at least at home, his diabetes proved difficult to control and his surgical interns and residents recall incidents in the operating room when an alert scrub nurse arranged for the circulating nurse to slip sugar cubes into Gillespie's mouth under his mask, from a supply that was always kept handy, when the effects of his low blood sugar became apparent.

Plagued by the residual financial constraints resulting from the Great Depression of the 1930s, followed by those imposed by the Second World War, Gillespie's annual reports to the superintendent of the University of Alberta Hospital in his capacity as Director of Surgical Services constitute a ten-year litany of increasing frustration. By 1930 the hospital had a total bed capacity of only 357 beds for all services and this remained constant until 1945.<sup>100</sup> During the period from 1939 to 1949 admissions to the surgical service doubled and the total number of operations increased by 88% between 1940 and 1949.<sup>101</sup> The admission problem was somewhat alleviated by the opening, in 1945, of the 250 bed Colonel Mewburn Pavilion for returning war casualties<sup>102</sup> but only approximately one third of this number were

available to the Department of Surgery. The number of operating theatres, however, remained constant throughout Gillespie's directorship of Surgical Services. This problem of surgical hospital beds and operating room facilities was compounded by the fact that the University Hospital was rapidly becoming the tertiary specialty referral unit for northern Alberta. In 1940 major operations constituted 29% of all operations performed while, by 1948, this figure had risen to 36%.<sup>103</sup>

While the pressure to serve an ever increasing patient population placed increased strain on the Department, the availability of patients referred by the Out-Patient Department and charity patients derived largely from city, provincial and federal relief recipients, traditionally the major source of clinical material for student instruction, were reduced to a trickle between 1939 and 1949. This was a result of enlistment in the armed services and a buoyant economy fueled by full employment of the employable population as a result of the explosive growth of war-related industries. By 1949 Gillespie also noted that "the movement towards socialization of medical services" was also adversely affecting the ability of the Out-Patient Department to provide sufficient patients for student instruction.<sup>104</sup> Between 1940 and 1949 charity patient admissions were reduced by 85% and admissions from the Out-Patient Department by 78%, although these figures represent total admissions, not those specifically to the Department of

Surgery.<sup>105</sup>

Interesting sidelights of these figures are the reflections they cast on the use of operating room facilities and the philosophy of patient availability for student teaching in Gillespie's day. In his 1945 report he noted that "the recent increase in the nursing staff needs further enlargement to permit afternoon operations every day", <sup>106</sup>and his 1949 report contained the statement that "a plan which was introduced two months ago, through which considerable work is done in the operating theatres in the afternoon is tending to relieve the heavy pressure for operating space"<sup>107</sup>. Long gone, today, is the time when surgeons operated only in the morning and their afternoons, except for emergencies, were reserved, sacrosanct, for office consultations.

A second interesting observation is the reaction of the academic medical establishment to the reduction of charity patients for student teaching. In his 1941 report Gillespie observes, in relation to the reduced number of charity patients, that: "Consequently, the teaching of steadily growing medical classes for the University continues to be embarrassed. The staff has had to use private cases for teaching, and this dangerous procedure is already being reflected in the attitude of pay patients in our public wards, who naturally would prefer hospitalization elsewhere".<sup>108</sup> In this regard it is interesting to note that, by 1961 in the same institution, the use of non-



charity patients for undergraduate medical education was judged to pose no significant problem and was accepted without question.<sup>101</sup>

As a final note to this documentation of a cluster of situations that plagued clinical service directors in hospitals dedicated to student instruction during the war years one must record the decimation of the cadre of surgical teachers through the loss of young faculty members and prospective faculty members to the armed forces between 1939 and 1945. These factors combined to place a crushing burden on medical school teachers, and particularly on those charged with the responsibility of administering teaching departments.

It was as a teacher that Fulton Gillespie obviously found the satisfaction and fulfillment that was lacking in his role as a medical administrator. He was an educator both by inclination and by training. Beginning in 1931, when still a very junior member of the University teaching staff, he introduced and organized the week-long Annual Refresher Course for practicing doctors from the province of Alberta and beyond, a responsibility he retained until his death. The course attracted up to 200 physicians and surgeons annually throughout the 25 years of its existence.<sup>102</sup> He also contributed personally to the course virtually every year as a speaker, a participant in the popular Operative Clinics in General Surgery, and as a session

chairman.<sup>110</sup> In 1940 he became a member of the Committee on Education of the Alberta Division of the Canadian Medical Association and served as chairman of the Committee between 1942 and 1946 and again from 1948 until his death the next year. One can say, without reservation, that Gillespie introduced Continuing Medical Education in the province of Alberta since it was not until medical instruction began at the University of Calgary in 1970 that Continuing Medical Education in the south of the province was formally taken over by the latter institution.

Gillespie was, first and foremost, a scholar of surgery and of the humanities, both of which doubtless contributed to his popularity and effectiveness as a teacher. Not only was he formally trained in the latter profession but he had those personal attributes that are the essential ingredients possessed by most great teachers: he enjoyed teaching, he was interested in his students and he supported them far beyond the call of duty. The author has preserved a series of ten letters written to him by Fulton Gillespie between 1946 and 1947 when Gillespie must have spent many hours he could ill afford attempting to arrange surgical training for one of his recent graduates. In that post-war milieu such training was unbelievably difficult for a graduate of a small western Canadian medical school to obtain. The letters are those of a kindly, concerned, father-figure and mentor and, incidentally, one who felt that training in Britain was clearly the preferred option.

In his informal small group teaching session with students he was renowned for the earthy aphorisms he injected into the discussion, aphorisms that are repeated by those students to this day. Unlike his predecessor, Colonel Mewburn, however, no one ever heard him take "the Lord's name in vain". Three among his many remembered pronouncements will serve as examples.<sup>112</sup> When an unwary student would propose some grossly ineffective therapeutic agent for the treatment of some condition he was prone to exclaim: "That's about as much use as trying to fertilize a three acre field with a fart." In the interval between the graduating class of 1943 and that of 1946, the only change reported relative to the story seems to have been that, for increased emphasis, the field was enlarged to five acres. Another of his pearls, when describing a difficult procedure, was to proclaim that it was "like trying to catheterize a three day old fly".

Another favourite which Gillespie would pass on to his housemen following a difficult anastomosis where the diseased bowel was particularly friable was to describe the procedure as attempting "to suture a sunbeam to a fart". It sounds crude but, to one who has had this experience, it is so very true and so very expressive. Such pronouncements were seldom forgotten.

Gillespie's scholarship is particularly apparent in his writing and his verbal presentations to his colleagues. He was not a prolific contributor to the surgical literature and it has

been possible to find only nine papers published by him. Two of these are modest case reports, two are medico-philosophical in nature, and five deal with clinical surgical conditions.<sup>113</sup> The latter invariably include an exhaustive review of the literature, stress surgical anatomy and surgical principles rather than surgical technique and are finely crafted by a skilled communicator. They contain frequent reference to medical history and to the classics of literature. Here, for example, is the arresting introduction to his 1937 paper on *The Clinical Problem of the Nodular Breast*.

It is just a hundred years since James Syme performed a mastectomy in old Minto House, Edinburgh. Syme's clinical clerk, John Brown, has immortalized the story of poor little Ailie, the cotter's wife in "Rab and his Friends". Without anaesthesia the master surgeon removed the cancerous breast, only to be defeated within the week by the onset of surgical fever.<sup>114</sup>

The two medico-philosophical papers are of particular interest. In 1934 Gillespie presented a paper before the Section of Historical Medicine at the meeting of the Canadian Medical Association in Calgary which was published the following year under the title *Doctors and Music*. This was obviously a topic close to his heart and we will meet Gillespie, music lover and accomplished pianist, later. Noteworthy, however, is the fact

that he records only two references and acknowledges his appreciation "of the assistance of music lovers, both lay and professional, on both sides of the Atlantic, without whose help this could not have been made as representative as it is."<sup>115</sup> This series of biographic sketches of physicians who gave up medicine for music, or more commonly combined careers in both, represents extensive scholarly investigation and time-consuming correspondence with friends around the world.

The other article of this genre, entitled *The Training and Rewards of the Physician*, was presented at the medical convocation at the University of Manitoba in 1945, and published two years later. Here is Gillespie at his scholarly best. The frequent references to the classics, integrated beautifully into his text, are obviously drawn from memory by a widely read bibliophile and not simply derived, as embellishment, from some book of familiar quotations.

In the same article, speaking of the career opportunities available to medical graduates, he has this to say of the specialist.

The pressure of the specialist's practice becomes heavy. He has breakfast with his wife before the children are out of bed, and they have retired before he returns for the night. He eats his lunch downtown. It is rare for him to be able

to enter public life at all. And finally he matures and "runs down" by the time he is sixty. He may have developed a competence on which he can live, but he is likely to be envious to see his classmate, who is a general practitioner, still sought for and active.<sup>116</sup>

These observations, which sound very much as though they were penned by a disillusioned surgical specialist, were published two years before Gillespie's death at age 58 and were, perhaps, prophetic in his case. It is not surprising, in view of his chronic health problems and the stress to which he was subjected as an academic surgical administrator and teacher during the war years, that he felt himself "running down."

Mrs. Gillespie confirmed that her husband, an avid reader, divided his reading time between surgery and the classics and that the latter were replete with underlining and marginalia concerning passages of special interest to him.<sup>117</sup>

Gillespie's facility with words was well recognized by his colleagues. Sclater Lewis, in his history of the Royal College of Physicians and Surgeons of Canada, while noting that it was the custom for the College president to introduce the distinguished guest speaker at the annual dinner of the College writes:

Dr. Gillespie had qualities of a different character (than the previous presidents referred to, Dr. W. Penfield and A.T. Mathers), one might say he had a simple way of expressing his thoughts and yet he gave interesting glimpses of a broad cultural background and an intimate knowledge of music and the arts. He was the first president to bring a few words of French into these introductions.<sup>117</sup>

The latter was probably judged all the more remarkable in the 1940s coming from an Albertan.

Fortunately for Gillespie the revolution in medical education in North America which began in the 1950s and exploded in the 1960s occurred after the Gillespie professorship.<sup>118</sup> In 1939 when he assumed the departmental chairmanship, the curriculum was essentially the same as that which had been introduced when the medical school went to a six-year degree program in 1924.<sup>19</sup> Undergraduate curricular change did, indeed, occur during the Gillespie years but, while significant in its philosophy, it had only modest impact on the teaching of the Department of Surgery.<sup>119</sup>

Of considerably greater impact on the surgical teaching staff and the medical students was the decision, in 1942, to accelerate the medical course in order to increase the supply of doctors to meet the military and civilian needs of a nation at

war.<sup>120</sup> While the curriculum did not change significantly, teaching was now carried out throughout the calendar year rather than the usual eight-month university session. Consequently three university years could be offered in two calendar years with resulting increased physician output to meet wartime needs. To compensate for the loss of earning power in the summer, medical students were eligible to enlist in the army as privates and all who could pass the entrance medical examination did so. In 1944 the entering medical class reverted to the normal eight-month university year although those students already in the accelerated program continued until their graduation.<sup>120</sup> This added an additional load on those already overworked, and mostly older, teachers who carried the burden of medical instruction in Canada during the war years.

Throughout most of the Gillespie era the Alberta Faculty of Medicine continued to be dedicated exclusively to undergraduate education. After the Second World War, however, with only two organized specialty training programs in Canada at the Universities of Toronto and McGill, pressure to enter the field was so great that University of Alberta introduced such a program in 1946. It was called, after its founder Dr. Mark Marshall, "the Marshall Plan." Gillespie played little role in its organization or implementation and it was Walter C. Mackenzie who represented the Department of Surgery on the Committee, set up under Marshall, to establish postgraduate specialty training.<sup>121</sup>



Fulton Gillespie was not an outstanding technical surgeon. This was doubtless due, in large measure, to the fact that he was born both too soon and too late. Too soon because adequate training programs for surgeons were unavailable in Canada when he graduated in medicine in 1920. His one year of surgical exposure as a senior intern would constitute grossly inadequate background to provide the technical excellence required for one destined for a career in academic surgery. Too late because, even if his health problems had not prevented him from serving in the army as a medical officer, it is most unlikely, particularly in view of his ambivalence regarding, and his delayed choice of, a medical career, that he would have been ready to profit from the extensive wartime surgical experience that honed the technical surgical excellence of his predecessors. Gillespie's postgraduate surgical trainees do not remember him for his excellence as a technical surgeon but rather as a compassionate, caring and scholarly surgical practitioner. These latter qualities were probably also the reason he was so highly respected and greatly admired by his patients.

The number of medical societies of which a western Canadian academic surgeon might become a member in Gillespie's day was but a small fraction of those available today. He not only joined those available but was active in their promotion and in their programs. In 1934 he was elected president of the Edmonton Academy of Medicine<sup>122</sup>, having served as the Academy's secretary-

treasurer in 1927 and again in 1931.<sup>121</sup> In 1936 he was elected president of the Alberta Division of the Canadian Medical Association.<sup>122</sup> His service as chairman of the Division's Education Committee for some six years has already been noted. At the time of his death he was president of the Western Association of Clinical Surgeons.<sup>123</sup>

His major contribution to, and the highest honour awarded him by, organized medicine came in 1947 when he was elected to a two year term as the tenth president of the Royal College of Physicians and Surgeons of Canada.<sup>124</sup> A Charter Fellow of the College, he was elected a member of the College's Council in the Division of Surgery in 1941 and between that date and his death, eight years later, he served terms on virtually all of its Committees as well as a two-year term as vice-president of the Division of Surgery from 1945-1947.

It is interesting to review those issues which exercised the president and Council of the Royal College during the Gillespie presidency, eighteen to twenty years after the College's founding. Probably the major issue between 1947 and 1949 was the question of the accreditation of Canadian hospitals with respect to their ability to provide specialty training.<sup>125</sup> Although this issue had been raised from time to time no action was taken until June, 1947 when a proposal was submitted by a committee chaired by Dr. R.F. Farquharson and was approved by the College Council.

Hospitals seeking approval were invited to complete a lengthy questionnaire which was then reviewed by the Committee on Approval of Hospitals for Advanced Training. At the Council meeting in November 1948, 37 of the 72 hospitals that applied were granted full approval for one or more services.<sup>127</sup> It was not until 1962 that the College decided to carry out on-site surveys on its own<sup>128</sup> although its assessment did utilize information from on-site surveys by other bodies prior to that time. This delay in initiating its own surveys was a source of concern and of much discussion by the College from the very start but financing such a program was completely beyond its resources during the Gillespie presidency.<sup>129</sup>

While the issue of accreditation of hospitals was probably the most time-consuming activity of the Council and its Committee during these years, the implementation of the admission of applicants to Fellowship under the "Amended Act of 1945" was the most contentious. Section 5 of the original Act of Incorporation of 1929 under which Gillespie was admitted as a Charter Fellow of the College has already been referred to.<sup>130</sup> The Amended Act of 1945 permitted Council to admit to Fellowship, without examination, persons of distinction without any time restriction. Not surprisingly, many Fellows of the College felt that after 16 years the only acceptable route of entry to the Fellowship should be by examination. Others identified specific individuals in the list being considered as unsuitable. In 1948 the Council, after

much discussion and soul-searching, finally admitted 22 individuals to Fellowship under this provision.<sup>110</sup> A year later, following the entrance of Newfoundland into confederation on March 31, 1949, Council received no criticism when it awarded a small number of Fellowships to deserving residents of the new province under the same provision.<sup>111</sup>

Two of the actions of the Council during Gillespie's presidency must have brought him much satisfaction. The first was the decision to hold duplicate oral and practical examinations in western Canada beginning in 1949 if five or more candidates were eligible to take the examination in any of the recognized specialties.<sup>110</sup> The second was the inauguration of the College's program of medal awards for the "best original work in the basic sciences or in clinical research by a Canadian, one in medicine and one in surgery to be awarded, for the first time, at the Annual Meeting in 1949."<sup>112</sup> Such an award program had, in fact, been suggested by Dr. E.S. Mills as early as 1941<sup>113</sup> but the details were only worked out and the final proposal accepted by the Council in 1948. Gillespie must have been particularly proud when one of the graduates of the University of Alberta, Dr. W. Stanley Hartcroft, was chosen as the recipient of the first medal in Medicine in 1949.<sup>114</sup>

This then documents the life and the career of W. Fulton Gillespie, a life lived at a stage of transition in western

Canadian academic surgery. But what of the nature of the man himself. The following picture is drawn mainly from recent interviews with the two surviving Gillespie children, William "Bill" and Elspeth<sup>21</sup> and to a lesser extent from an interview with Fulton Gillespie's wife, Ethel Evelyn (Corey) in 1965. It is based too on personal recollections, since Fulton Gillespie was the author's Professor of Surgery, and on conversations with, and letters from, Gillespie's associates and students.

When they settled in Edmonton in 1925 the Gillespies lived in Fulton's parental home and remained there probably until the early 1930s. In 1937, after living in a succession of rented homes, they built their own house in the university district of the city. The Gillespie children considered themselves to be in about the same economic and social bracket as their neighbors. It would probably be classed as an upper middle class neighborhood in a city which, in those days, was notable for the absence of either significant poverty or great personal wealth. While finances were never an immediate problem in the home the children were aware that their father was unable to get adequate life insurance because of his medical problems and that this was a source of concern to him.

Prominent among the factors which shaped life in the Gillespie household was adherence to a rigid code of presbyterian spirituality and morality which, although now seldom seen, was

very much a part of the life of many Canadian families of Scottish descent at the turn of the century. Attendance at church, and in addition Sunday school for the children, was a required Sunday ritual. On Sunday, unlike during the week, the big meal was served at noon and the rest of the day was dedicated to quiet pursuits and to reading. Noisy play was not acceptable. Bill found this oppressive, Elspeth less so, but both welcomed the opportunity, when it was possible, to get out of the house on Sunday and play with their more emancipated friends. As has been noted, Fulton, while a student at the University of Alberta, played a prominent role in the Young Men's Christian Association at a time when the operative and overriding word in that title was Christian and the focus a religious one. It will come as no surprise then that shortly after his arrival in Edmonton in 1925 he became the superintendent of the Sunday school at First Presbyterian Church, a position he held for fifteen years. In addition he served as an elder and, when the organist was away, played the three keyboard organ for the Sunday services. Bill recalls that his father read his Bible every night of his life.

By all accounts Fulton Gillespie had a remarkable ear for music. His musical instruction on the piano began at an early age and although, according to his wife, he took few if any examinations to document his progress he was an accomplished

pianist and organist by the time he first entered the University of Alberta at age 20. Musical talent was fostered in the children all of whom took lessons, some reluctantly. Bill recalls that if he should happen to strike a wrong note while practicing, his father, regardless of where he might be in the house, was able not only to identify the error but also identify, by name, the note that should have been played. The bench of his Steinway baby grand piano was where Gillespie found relaxation and where he spent much of his leisure time. Elspeth recalls that, if he was able to get home from the hospital by noon, he would have lunch followed by a brief siesta and then, if there was time, relax at the piano before going to his office in the Birks Building. For his own enjoyment he played only classical music but at parties he was invariably called upon to provide the accompaniment for the inevitable sing-song of which he was the catalyst. He was a master at improvisation and his children believed he also composed although none of his compositions is known to have survived.

Ethel and Fulton Gillespie had many friends drawn mainly from medical colleagues at the University Hospital, neighbors who were largely professionals, and "cottage friends" from their summers at Kapasiwin Beach on Lake Wabamum where they owned a cottage. They had an active social life and entertained frequently. The children remember the ritual of the two big Christmas parties, one for neighbors and hospital interns and the

other for close friends. At these functions mulled wine was served but other alcoholic drinks were available. Hard liquor was not, however, on display in the Gillespie home and tended to be hidden away. Fulton, himself, used alcohol sparingly although at Christmas this sometimes proved difficult. Elspeth recalls that it was the custom for the whole family to make the rounds of their parents' close friends on an evening shortly before Christmas in order to exchange holiday greetings and gifts and to share a dram as a wassail. On one such occasion, not long before Gillespie's death, the wassailing having been completed, Margaret and Elspeth noticed that the gifts that had been received had disappeared from the back seat of the car. Nor was that the totality of the loss. Gillespie's "doctor's bag" was also missing. They had been robbed. On their return home Fulton immediately telephoned the police. While the girls listened in the adjacent room barely able to control their hysterics, their father, with slurred and somewhat incomprehensible speech, attempted to explain his predicament to the officer on the other end of the line while professing that he was, indeed, stone sober and in complete control of his senses.

Son Bill was very supportive of his parents having parties at their home. When he reached an age at which he could get a license to drive he talked his father into giving him \$75.00 to buy a second-hand car. However, there was a problem. Gasoline was rationed. On his parents' party nights he found the



collection of well filled gasoline tanks parked around his home irresistible and replenished his own by siphoning a modest unrecognizable contribution from the cars of each of his parents' guests for his own use.

Although as a young man Fulton Gillespie had been active in, and excelled at, team sports these were sacrificed with the onset of his diabetes and in consequence of his busy professional life. Initially on returning to Edmonton he played golf as a member of the Mayfair Golf and Country Club but that soon came to an end. Nor did he show much interest in sports as a spectator although Bill remembers going to the occasional hockey game with his father and the Gillespies did, for a time, have season tickets to the home games of the Edmonton Eskimo Football Club. Later, in the 1950s and 1960s it was almost impossible to practice surgery in Edmonton if one did not attend the Eskimo home games. The hospitals virtually shut down during games and knowledge of what took place during each game was mandatory "doctors' room" talk the next day.

As an adult, Gillespie's life was a sedentary one. While he enjoyed his garden in the city, the Gillespies employed a gardener once a week and his active participation was minimal. When at their lake cottage immediately after its purchase he busied himself clearing brush but seemed to know his limitations, paced himself, and once this job was completed resumed his

inactive life.

Fulton Gillespie was an inveterate and compulsive cigarette smoker. Son Bill expressed disbelief and irritation that a medical person in chronic poor health "always had a cigarette hanging out of his mouth"<sup>115</sup> and, in the light of current knowledge, his reaction is fully justified. However, in 1938, when the Canadian Medical Association published its *Handbook on Cancer for the Medical Profession* it devoted only three of 234 pages to the subject of lung cancer, and cigarette smoking is not even mentioned.<sup>115</sup> In fact, it was not until 1950, a year after Gillespie's death, that the studies of Doll and Hill in Britain, and Wynder and Graham in the United States, demonstrated a relationship between tobacco, lung cancer and other disease states.<sup>116</sup> Gillespie may then be forgiven since he was, at least, uninformed as to the magnitude of his transgression.

In addition to music, reading was his other passion and his source of relaxation. This was equally divided between medicine and the classics and, among the latter, he manifested a preference for literature relating to music and its composers. The family subscribed to five monthly magazines that he read from cover to cover. His children were greatly impressed with the breadth of his knowledge. Mrs. Gillespie confided that his copies of the classics, especially his Shakespeare, were extensively underlined and replete with marginalia. He had a

particular interest in, and wrote, poetry although none identifiable as originating with him seems to have survived.

It is interesting that children's impression of a parent may be at variance with the opinion of that parent's spouse and associates. Also, those impressions may vary widely among the children themselves. Ethel Gillespie remarked that "Fulton had a similar sense of humor as his father and also had an uncanny ability to find just the right words to say to defuse a tense situation and inject a little humor into a conversation that was becoming uncomfortable." This too was the opinion of a close associate who found he had "much humor in his system." On the other hand his children found him preoccupied, not to be a talkative person (except occasionally at meal time), and not one given to frivolity or joking. To them he was rather formal and reserved, something that manifest itself in his dress habits. In the evening he never shed his white shirt and tie and his only concession to informality was to replace his suit jacket with a smoking jacket. He never wore sports clothes and even at their lake cottage this formality was relaxed only slightly.

Many children brought up in a Scottish-Canadian home in the early decades of this century would probably have a somewhat similar reaction as did Gillespie's son who learned first-hand the advantages and disadvantages of having a dour Scot and Professor of Surgery as a parent. Bill candidly admits to

harboring some resentment that he never felt close to his father, that his father was never a "pal" and was, in fact, a "stranger to his only son." Bill noted, for example, that his father never played games with him or took him hunting as did other fathers. When Bill did go hunting it was invariably with one of his friends and their father. Although he appreciated that his father's health problems doubtless contributed to his failure to play the parental role which Bill expected and longed for, he placed the major blame on the demands of a medical career, perhaps more precisely on an academic surgical career, and determined that he, himself, would never follow such a profession. These feelings, although still present, have tended to be moderated with the passage of time and as he has come to appreciate the high regard in which his father was held by his colleagues and patients. The disappointment still wrangles although he has now come to respect his father's accomplishments.<sup>11</sup> Difficulty in effectively balancing one's personal and family responsibilities versus one's professional responsibilities is an endemic disease of the medical profession. The assignment of priorities in this regard is a duty which is often not addressed until too late when one is forced to confront one's own mortality. Sadly, such examples are not hard to find.<sup>12</sup>

One wonders how many doctors' sons, and daughters, secretly

share such feelings of resentment that their physician fathers or mothers seem to be the slave rather than the master of their professional life. Interestingly, Elspeth did not share her brother's feelings in this regard. She found her father a patient, compassionate and happy man, not given to losing his temper or to swings of mood. Although he was not one to read to or play with her, and she found him reserved and somewhat stern rather than jolly, she accepted such behavior as reasonable and, like her brother, respected her father doubtless in part because it was clear that others held him in high regard.

As in all such Scottish homes, honesty and truthfulness were qualities that were highly regarded and were demanded of the children. Likewise general education and, in the Gillespie household, musical training, required to be pursued with vigor and the children were pushed to excel at both.

Dr. Angus C. McGugan, a colleague of Gillespie, in his obituary notes that: "his astute kindly observations in the philosophy of living ... will be immortalized through the many hundreds of students" and goes on to say "liberally educated, truly thoughtful and a man of firm convictions, Dr. Gillespie was never over assertive. In his conversation and the expression of his opinions he evidenced that courteous restraint that characterizes the gentleman."

On April 23, 1956, Dr. James T. Priestly of the Mayo Clinic was the speaker at the W. Fulton Gillespie Memorial Lecture at the University of Alberta. In his introduction of Dr. Priestly, Dr. Earle P. Scarlett, then Chancellor of the University and a shrewd observer of the human condition, spoke of Dr. Gillespie as follows:

The name Gillespie is derived from the Gallic meaning a servant. And the name suited the man, for he was in a very real sense a servant of Medicine and of his fellow man. His loyalty, generosity and humanity salted with humour gave him a high place in the affectionate regard of all ..... He was concerned with the mysteries of Time and Eternity as well as the immediacies of medical practice.<sup>111</sup>

On November 29, 1949, Fulton Gillespie suffered a heart attack on the train while returning to Edmonton from the Royal College of Physicians and Surgeons of Canada meeting in Toronto at which he had just relinquished the presidency of the College.<sup>112</sup>

Mrs. Gillespie, who accompanied her husband to the meeting, however had premonitions that his difficulties began somewhat earlier. In a notice of Gillespie's death which she prepared for inclusion in the newsletter of their church she states "In his address (at the closing dinner) he opened with 'this is your

dying president', (whereas it) should have been retiring president. I've always had a suspicion that he knew because he had a heart attack on the train coming home and died three days later (in fact, it was four days later)."<sup>12</sup>

His colleagues in the Royal College apparently had similar concerns since, in announcing Gillespie's death, the council recorded: "Always a sensitive man, his end may well have been hastened not only by his intense devotion to duty but also by a desire to avoid disturbing others by a disclosure of his distress at the time of the Annual Meeting."

Mrs. Gillespie telephoned ahead in order to have Dr. Donald R. Wilson, Gillespie's physician, meet the train with an ambulance but, as a final act of Scottish pride, Gillespie refused to be carried off the train and walked to the waiting ambulance.<sup>20</sup> The history recorded in his hospital chart at the time of his admission on November 30, 1949, confirms that symptoms of his series of heart attacks began on the 25th of that month, the day the two-day meeting of the College began. W. Fulton Gillespie died, at age 58, on December 3, 1949.

What then may be learned from the life of William Fulton Gillespie? From the man we learn something of the character and the values of the Scottish immigrants and of their children who grew up in Canada at the turn of the century. From his

postgraduate education we are given a glimpse of the first organized, pre-Gallie Course, surgical training program in Canada. Finally, from his career we get a feel of what it was like to be an academic surgeon, and later a professor of surgery at a young, struggling western Canadian medical school immediately following the Great Depression and during the Second World War. Not only was Gillespie a product of Canadian academic surgical training in transition but he inherited a Department of Surgery and a hospital surgical service in transition from one with purely undergraduate teaching aspirations and no research involvement to one with an extensive program of postgraduate specialty training and poised to undergo a major transformation into one with a major commitment to and expertise in surgical research. The pressures and stresses with which academic physicians and surgeons in Fulton Gillespie's day were forced to contend lead inevitably to the conclusion that he, and doubtless others, were as much casualties of the war, albeit in a civilian role, as were those that gave their lives on battlefields overseas.



## Notes

- \* It is a pleasure to acknowledge the financial assistance of the Hannah Institute for the History of Medicine which made this study possible. The author is most appreciative also for the assistance provided by a number of archives that opened their holdings for study and to the individual archivists and librarians who guided the author to essential resource material. They include: University of Alberta Archives (Mr. Brian Hobbs and Mr. Mark Vajcner), University of Toronto Archives, Royal College of Physicians and Surgeons of Canada Archives (Ms. Jean McQuilliam), American College of Surgeons Archives (Dr. George W. Stephenson), Provincial Archives of Ontario, Metropolitan Toronto Reference Library, University of Alberta Hospitals Archives (Ms. Barbara Johnston), College of Physicians and Surgeons of Alberta (Dr. Donald E. Chadsey), Edmonton Public School Archives (Ms. Lori Diakur), Glenbow Museum and Archives (Ms. Lindsay Moir), University of Alberta Alumni Affairs Office (Ms. Susan Peirce), Toronto Hospital Museum and Archives (Ms. Felicity Pope), University of Alberta John W. Scott Health Science Library (Ms. Jeanette Buckingham), University of Alberta Hospitals Health Records (Ms. Roxanne Hum) and Red Deer City Archives (Ms. Mary Joan Cornett). I should also like to express my thanks to Dr. Robert J. Johnston, of Edmonton, who tracked down the surviving Gillespie children and made the preparatory arrangements for their interview.

## NOTES

1. Walter H. Johns, History of the University of Alberta: 1908-1969 (Edmonton: University of Alberta Press, 1981), p.3
2. Johns, History of the University of Alberta, P.24.
3. University of Alberta (U. of A.) Archives, University of Alberta Calendar, 1913-14, p. 107. Accession No. LE-3-A6g 1913-1914.
4. U. of A. Archives, University of Alberta Calendar, 1915-16, p. 77 and 78. Accession No. LE-3-A6g 1915-1916.
5. University of Toronto (U. of T.) Archives, Insert in University of Toronto Calendar, Faculty of Medicine Section, 1917-1918. In bound volume between pages 32 and 33. Accession No. P.78-0022 (01).
6. U. of T. Archives, University of Toronto Calendar, 1919-20, p.35. Accession No. 78-0071 (21).
7. U. of A. Archives, University of Alberta Calendar, 1919-20, p. 60. Accession No. LE-3-A6g 1919-20.
8. Angus C. McGugan, The First Fifty Years: A History of the University Hospital: 1914-1964. (Privately Printed, no date), P. 1-13. contains a brief history of the Strathcona Hospital which, in November, 1922, became the University of

Alberta Hospital.

9. U. of A. Archives, University of Alberta Calendar, 1923-24, p. 92, Accession No. LE-3-A6g 1923-1924.
10. U. of A. Archives, University of Alberta Calendar, 1924-25, p. 89. Accession No. LE-3-A6g 1924-1925.
11. John W. Scott, The History of the Faculty of Medicine of the University of Alberta: 1913-1963 (Privately Printed, 1963), p. 13.
12. Herbert E. Rawlinson, "Frank Hamilton Mewburn, O.B.E., M.D., C.M., L.L.D., Lt.-Col., C.A.M.C., Professor of Surgery, University of Alberta, Pioneer Surgeon," Canadian Journal of Surgery, 2 (1958): 1-5. In order to get a feel for the circumstances under which F.H. Mewburn operated one should consult Frances S. Coulson, "Medical pioneering in Alberta, the first surgeon in the West, Frank Hamilton Mewburn (1858-1929)." Calgary Associate Clinic Historical Bulletin, 10 (1945): 120-125. On page 121 she records: "the patient was laid out on the dining-room table. As the operation proceeded Miss McDonald (a nurse) was holding a lamp with one hand and an ejector with the other..." and also Peter M. Campbell, "Frank Hamilton Mewburn." Calgary Associate Clinic Historical Bulletin, 15 (1951): 61-69. On page 65 he writes "He performed his first appendectomy in 1887, in a

saloon, a pus case, drained with recovery." (Coulson adds to this story, on page 123, that the operation was performed "with a pool-table as his operating table and the barber giving the chloroform." On page 65, Coulson tells us that: "He operated - and successfully - in a room over a livery-stable, with the livery-man as anaesthetist and a roustabout as circulating helper."

13. Robert A. Macbeth, "Alexander Russell Munroe: 1879-1965", Canadian Journal of Surgery, 10 (1967): 3-10.
14. Robert A. Macbeth, "Walter C. MacKenzie, OC, BSc, MD, CM, MS, FACS, FRCS(C), Hon FRCS, Hon FRCS (Edin), Hon FRCS (Ire), Hon FRCS (Glas), LLD (McGill), LLD (Dalhousie), LLD (Manitoba), 1909-1978." Canadian Journal of Surgery, 22 (1979): 303-307. Robert A. Macbeth, "Walter Campbell Mackenzie, Pioneer International Surgical Statesman, Part 1: Background and International Recognition." Annals of the Royal College of Physicians and Surgeons of Canada, 22 (1989): 109-113. Robert A. Macbeth, "Walter Campbell Mackenzie, Pioneer International Surgical Statesman, Part 2: What Manner of Man?" Annals of the Royal College of Physicians and Surgeons of Canada, 22 (1989): 209-212.
15. This date, for the birth of William Fulton Gillespie, appears consistently in his applications for entry to the University of Alberta and the University of Toronto, and his

applications for Fellowship in the Royal College of Physicians and Surgeons of Canada and the American College of Surgeons. It has proven impossible, however, to confirm this date following a search of the Registration of Births in the Province of Ontario Archives from 1866 (the date of his parents marriage) to 1895. The birth of his older brother, Allister Campbell Gillispie, is recorded on 11 August 1886, registration number 035124-86. The difference in the spelling of Gillespie led to a search for the marriage registration of Fulton's parents, registration number 011447-85. There too Alexander Gillispie's name is spelled with an 'i'. However, a repeat search of the birth registration for W. F. Gillespie under both spellings of the name was equally unrewarding as was a search for the birth registration of W. F. Gillespie's sister, Annie, who, according to W. F. Gillespie's wife, was three years his junior. The only answer the staff in the Provincial Archives could provide was that births were not always registered in the late 19th century or that the birth was registered under another name. No birth is registered on that date under the surname Fulton.

16. John S. Wright, "Dr. Alexander Gillespie: 1854-1937: An Appreciation." Canadian Medical Association Journal, 36 (1937): 99. John Blue, "Alexander Gillespie, M.D." in Alberta, Past and Present (Alberta Medical Biographies), no date, p. 131-132. (Available in the Phyllis Russell Room,

John Scott Medical Library, University of Alberta)

17. "Pupils who have been successful in the Departmental Tests recently held throughout the Province." The Edmonton Daily Bulletin, Vol.8, No.129 (August 5, 1910). Robarts Library, University of Toronto Accession No. mfm: AN: E345, May to August 1910.
18. Angus C. McGugan, "Dr. W. Fulton Gillespie (Obituary)" Canadian Medical Association Journal, 62 (1950): 208-209. Also: Alberta Medical Bulletin, 15 (1950): 43.
19. University of Alberta Hospital Patient Chart No. 9777 on Dr. W. Fulton Gillespie. This information is contained in Dr. Gillespie's "past history" during his admission on 29 February 1948. Permission to review this medical record was given by Dr. Gillespie's daughter, and next of kin, Mrs. Elspeth Staden.
20. Interview with Mrs. Allan Day, widow of Dr. W. Fulton Gillespie on 26 July 1965, in relation to the preparation of a history celebrating the 50th anniversary of the Department of Surgery, University of Alberta.
21. Interview with Mr. William A. Gillespie on 21 April 1997 and Mrs. Elspeth M. Staden on 22 April 1997.

22. Information derived from newspaper clippings in Fulton Gillespie's scrapbook. The source of the article dealing with the Edmonton-Strathcona game remains unidentified. The article reporting on the Rutherford Cup game appeared in the Evening Journal, subsequently the Edmonton Journal, Vol.7, P.5, on April 25, 1910. The latter notes: "Gillespie on full back also played a brilliant game, working well in his position and punting strongly. But for his quick checking the score would have been much larger than it was." (The score was one to zero)
23. Edmonton Daily Bulletin Vol.8, No.84 (13 June 1910).  
Robarts Library, University of Toronto, Accession No. mfm:  
AN:E345, May to August 1910.
24. John W. Chalmers, Schools of the Foothills Province: The Story of Public Education in Alberta (Toronto: University of Toronto Press, 1967), P.412
25. E. W. Coffin, Sixth Annual Report of the Department of Education of the Province of Alberta: 1911 (Edmonton: J.E. Richards, Government Printer, 1912), p.45. A page from the 1911 Calgary Normal School Register for the first class of 1911 includes as No.5 Mr. Fulton Gillespie, age 19, of Edmonton. This document was provided by the Archives and Museum Division of the Edmonton Public Schools.

26. John W. Chalmers, Teachers of the Foothills Province: The Story of the Alberta Teachers' Association (Toronto: University of Toronto Press, 1968), p.9.
27. Chalmers, Teachers of the Foothills Province, p.8.
28. Chalmers, Schools of the Foothills Province, p.414.
29. Newspaper clipping in Fulton Gillespie's scrapbook entitled "Christmas Concert", unidentified as to source.
30. U.of A. Archives, University of Alberta Calendar, 1911-1912, p. 13. Accession No. LE-3-A6g 1911-1912
31. U.of A. Archives, University of Alberta Calendars, 1912-1913, 1913-1914, 1914-1915. Accession Nos. LE-3-A6g 1912-1913, LE-3-A6g 1913-1914, LE-3-A6g 1914-1915
32. The Gateway (University of Alberta student newspaper), Special Number, April 1914, p.21 Available on microfilm, University of Alberta Archives.
33. "Schools are now coming to a close," Dawson City Daily News, No. 281 (June 24, 1915), unpagged. Metropolitan Toronto Reference Library. Microfilm Accession No. CLA781, reel 11.
34. "Boy Scouts off for annual outing," Dawson City Daily News,



- No. 283 (June 26, 1916), unpagged. Metropolitan Toronto Reference Library. Microfilm Accession No. GLA784, reel 14.
35. "Prof. Gillespie to leave on boat tonight," Dawson City Daily News. No. 296. (July 11, 1916), unpagged. Metropolitan Toronto Reference Library. Microfilm Accession No. CLA784, reel 14.
36. U. of T. Archives, Minutes of the meeting of the University of Toronto Faculty of Medicine Committee on Applications and Memorials, Book V (January 6, 1916) p.56, Microfilm Accession No. A86-0027, reel 2, Box 33-1.
37. Ibid (September 19, 1916) p. 102.
38. U. of A. Archives, University of Alberta Registration Forms for W.F. Gillespie for the fourth year of his Arts (B.A.) course, the third year of his Medical course, and the first year of his Arts (M.A.) course.
39. Elise A. Corbet, *Frontiers of Medicine: A history of medical education and research at the University of Alberta* (Edmonton: University of Alberta Press, 1990), p.113.
40. U. of T. Archives, Minutes of the meeting of the University of Toronto Faculty of Medicine Committee on Applications and Memorials, Book VI (October 4, 1918) p. 56, Microfilm

Accession No. A 86-0027, reel 2, Box 33-1.

41. U. of T. Archives, University of Toronto Commencement Program (June 4, 1920), Accession No. P87-0046 (76).
42. U. of T. Archives, Faculty of Medicine Applications for Admission, 1918, William Fulton Gillespie. Accession No. A69-0008-182.
43. Annual Announcements of the College of Physicians and Surgeons of Ontario for 1919-1920 and 1920-1921. In the Archives of Ontario MS 5514 which contains the Announcements from 1915-1916 to 1927-1928. In the 1919-1920 Announcements, in the section outlining the prerequisites to taking the membership examinations of the College, there is no mention of any internship requirement. However in the 1920-1921 Announcements, on page 15, it is stated that "every student must serve as interne in a recognized hospital for at least six months." Gillespie successfully sat the College membership examination in 1920 following his graduation in medicine (page 27 of the 1920-1921 Announcements) and without any internship. Since the membership enabled one to be licensed to practice medicine in the province in which it was obtained, Gillespie's medical class would be the last to achieve membership without completing an internship. It is interesting to note, in the Announcements of 1919-1920 on page 103, that

"Council agreed to substitute the (examination of the) Medical Council of Canada for that of the Council of Physicians and Surgeons of Ontario ..... (this decision to come into force) when the principle involved is endorsed and acted upon by the Medical Councils of the other Provinces of the Dominion." Gillespie was therefore a member of one of the last medical classes to take the purely provincial examination leading to licencure.

44. Agnes K. Wilson, "News of the Graduates", The Trail, (University of Alberta Alumni Bulletin, 1920) 1: p.18, and Graduate Record card on William Fulton Gillespie, Office of Alumni Affairs, University of Alberta.
45. University of Alberta Student Statistics card and 1921 Convocation Book, Office of Alumni Affairs, University of Alberta.
46. Robert I. Harris, "As I remember him: William Edward Gallie: Surgeon, Seeker, Teacher, Friend," Canadian Journal of Surgery, 10 (1967): p. 143-145.
47. The history of medical instruction in Toronto is summarized from Charles M. Godfrey, Medicine for Ontario, A History (Belleville, Ontario: Mika Publishing Co., 1979). Charles Godfrey, John Rolph, Rebel with Causes (Madoc, Ontario: Codam Publishing, 1993). John J. Heagerty, Four Centuries

of Medical History in Canada (Toronto: Macmillan Co. of Canada Ltd., 1928), p. 72-90. N. Tait McPhedran, Canadian Medical Schools: Two centuries of medical history: 1822 to 1992 (Montreal: Harvest House, 1993), p. 71-87. W. Stewart Wallace, A History of the University of Toronto: 1827-1927 (Toronto: University of Toronto Press, 1927) p.208-211.

48. John Rolph conducted his first proprietary school from 1831 to 1837 when he was forced to flee to the United States as a result of his participation in the Rebellion of 1837. On his return from exile, Rolph reopened his school as the Toronto School of Medicine (1843-1854) which subsequently was called the University of Victoria Faculty of Medicine (1854-1874). In 1856, two years after Rolph associated his school with the University of Victoria in Cobourg, his entire faculty resigned and, under William Thomas Aikins, reestablished the Toronto School of Medicine.
49. Bishop Strachan founded King's College Medical School (initially for a brief period called the Upper Canada Medical School) in 1843 which functioned till 1849. He subsequently founded Trinity College Medical School which offered instruction from 1852 to 1856 and from 1871 to 1903.
50. Michael S. Cross and Robert L. Fraser, "Baldwin, Robert" in Frances G. Halpenny, ed., Dictionary of Canadian Biography, vol.8 (Toronto: University of Toronto Press, 1985), p.55.

Robert Baldwin, at the time co-Premier of the Province of Canada (created by the Act of Union of the British Parliament in 1840 which united Upper and Lower Canada, and which went into force on 10 February 1841. During this period what had previously been known as Upper Canada became Canada West), was determined "to end the connection of church and state in higher education, and to destroy King's College as a visible symbol of Anglican privilege and class favouritism." His University Bill of 1849" stripped the Church of England of its power in higher education and eliminated denominationalism at the university."

51. William G. Ormsby, "Hincks, Sir Francis" in Frances G. Halpenny, ed., Dictionary of Canadian Biography, vol.11 (Toronto: University of Toronto Press, 1982), P.413.
52. W. Stewart Wallace, A History of the University of Toronto 1827-1927 (Toronto: University of Toronto Press, 1927) p. 211.
53. Vern L. Bullough, "The Development of the Medical University at Montpellier to the end of the Fourteenth Century", Bulletin of the History of Medicine, 30 (1956): p. 515.
54. U. of T. Archives, University of Toronto Calendar, 1916-17, p.385. Accession No. P78-0021 (30). The year that Gillespie registered to enter the second year medical course

at the University of Toronto the calendar advised that "a Bachelor of Medicine will be eligible for the Degree of M.D. on the following conditions. 1. At least one year must elapse between the date of conferring the degree of M.B. and that of conferring the degree of M.D. 2. The bachelor must present an approved thesis embodying the results of an original research conducted by the candidate in any department of medicine. 3. The subject of the thesis must be submitted to the Registrar for the approval of the Board of Post-Graduate Studies at least five months before the degree is conferred."

55. U. of T. Archives, Minutes of the meeting of the Council of the Faculty of Medicine (February 4, 1916), p. 1649. Motion by Prof. David J. G. Wishart, Professor of Oto-Laryngology. Accession No. A86-0027, Box 018, File 1.
56. U. of T. Archives, Minutes of the meeting of the Faculty of Medicine Committee on Postgraduate Studies (October 19, 1920), p.24. Accession No. A86-0027, reel 11.
57. Ibid, (October 5, 1921), p. 55 - 56.
58. Ibid, (December 2, 1921), p. 67 - 68.
59. Ibid. (December 9, 1921), p. 73 - 74.

60. Ibid. (December 9, 1921), p.76.
61. U. of T. Archives, University of Toronto Calendar, 1922-23, p. 30 (item 64). Accession No. p 78 - 0023 (03).
62. U. of T. Archives, Minutes of the meeting of the Faculty of Medicine Committee on Postgraduate Studies (January 30, 1923) p.102. Accession No. A86 - 0027, reel 11.
63. Ibid. (May 22, 1923), p. 107 - 108.
64. In the 1920s, University of Toronto Calendars listed, by Faculty, and in some Faculties by year of the course, those students registered in the preceding year. In the 1922-23 academic year, the first year of the new M.D. and Ch.M courses were offered, two students were registered in the School of Graduate Studies for the M.D. program and none for the Ch.M. program. In 1923-24 candidates were registered for the M.D. course and four for the Ch.M. course. The latter included W.A. Dafoe of Madoc, W.F. Gillespie of Edmonton, Alberta, A.L. Heather of Guelph and N.J. Minish of Gilbert Plains, Manitoba. In both 1924-25 and 1925-26, two candidates were registered for the M.D., and only one for the Ch.M., namely W.A. Dafoe. In 1926-27 no students are listed as pursuing the Ch.M. course but, among the six students registered for the M.D., the name of W.F. Gillespie appears. Beginning in the 1927-28 year students registered

in the School of Graduate Studies are not listed by the degree course in which they are registered. Consequently one can only confirm that there is no W. F. Gillespie listed for the years 1927-28, 1928-29 and 1929-30.

65. U. of T. Archives, Minutes of the meeting of the Faculty of Medicine Committee on Postgraduate Studies (February 4, 1927) p. 158. Accession No. A86-0027, reel 11.
66. U. of T. Archives, University of Toronto Calendar, 1927-28, p. 421-422. Accession No. P78-0023 (08)
67. U. of T. Archives, Minutes of the meeting of the Faculty of Medicine Committee on Postgraduate Studies (December 2, 1930) p. 181. Accession No. A86-0027, reel 11.
68. W. Gerald Cosbie, The Toronto General Hospital, 1819-1965: A chronicle (Toronto: Macmillan of Canada, 1975), p. 209.
69. Letter of January 28, 1931, to the Registrar-Secretary of the Royal College (of Physicians and Surgeons) of Canada from Dr. W. F. Gillespie in reference to the suitability of his applying to the College for Charter Membership. This letter was made available by Ms. Jean McQuilliam, Archivist of the Royal College. Dr. Gillespie wrote: "I am under no misapprehension as to my qualifications, but have been wondering if I might submit my application on the strength



of the master of surgery degree obtained in 1929 at Toronto." He goes on to indicate he is seeking advice rather than simply requesting the application forms since an application based on this qualification: "might raise an unnecessarily embarrassing question, this degree being recent in origin and practically unknown." Finally he suggests that any such embarrassment might be avoided by consulting Professors Graham and Gallie as to the wisdom of his making application on this basis.

70. U. of T. Archives, University of Toronto Faculty of Medicine Calendar, 1929-30. p.11 Accession No. P78-0024 (02)
71. Gillespie's application for Fellowship in the Royal College of Physicians and Surgeons of Canada in 1931 lists his hospital appointments at the Toronto General Hospital as "1921 - Rotation 12 months, 1922 - Surgery 12 months, 1923 - Pathology 12 months." (His application to the American College of Surgeons four years later changes the order, placing Surgery after his year in Pathology.) Housestaff pictures in the archives of the hospital show him as a member of the resident staff in 1921-22 and 1922-23 and as a member of the housestaff in 1923-24, although these designations may be interchangeable (Personal Communication, Ms. Felecity Pope, Archivist, Toronto General Hospital). Review of the minute book of the Medical Advisory Board of the Toronto General Hospital from the meeting of May 17,

1919 to that of June 16, 1925, in which housestaff appointments are normally recorded, has proven to be unrewarding in confirming the details of Gillespie's service during this three year period. In fact, over the six year period reviewed, Gillespie's name appears only twice. In the minutes of the meeting of May 17, 1919 (page 21) it is noted that a "W.T. Gillespie has withdrawn his application (as a houseman)." This was presumably W.F. Gillespie and refers to the 1920-21 rotating intern year since there is no other Gillespie in the 1919 or 1920 graduating year. Subsequently, in the minutes of February 19, 1923 (page 77) it is recorded that "the following appointments to the intern staff for the year 1923-24 are recommended." In the list that follows W. F. Gillespie's name appears as one of four senior interns recommended to serve in pathology. One is forced to conclude that the minutes of these meetings are incomplete and that the evidence from the Royal College of Physicians and Surgeons of Canada application and the housestaff photographs are a true representation of the training taken. The fact that Gillespie did, in 1929, receive his Ch.M. from the University of Toronto would also support the conclusion that this requisite training was received.

72. Reminiscence of Dr. W. F. Gillespie written by Mrs. Gillespie shortly after his death. Provided with a Personal Communication from Mr. William A. Gillespie, Dr. and Mrs.

Gillespie's son. Mr. Gillespie states that this was contributed to the Newsletter of First Presbyterian Church in Edmonton.

73. Copy of Marriage Certificate provided by Mrs. Elspeth Staden, Dr. and Mrs. Gillespie's daughter.
74. Copy of Song Book issued to passengers on the "Noronic" and sent by Mrs. W. F. Gillespie, with a note on the back cover, to her parents following her honeymoon. Provided by Mrs. Elspeth Staden. This delightful train-boat-train trip between Alberta and Nova Scotia and return was well known to the author who made the trip on multiple occasions with his parents prior to 1938 to visit his maternal grandparents.
75. U. of A. Archives, University of Alberta Calendar, 1926-27, P 20. Accession No. LE-3-A6g, 1926-1927.
76. University of Alberta Hospital Report for 1926, covering the period from 1 April 1925 to 31 March 1926.
77. Qualification Form submitted to the Royal College of Physicians and Surgeons of Canada by W.F. Gillespie on February 10, 1931, Item 10. Provided by Ms. Jean McQuilliam, Archivist, Royal College of Physicians and Surgeons of Canada.

78. Harry W.V. Letts, The Edmonton Academy of Medicine: A History (Edmonton: Privately Printed by the Edmonton Academy of Medicine, 1986), p.9
79. Qualification Form submitted to the Royal College of Physicians and Surgeons of Canada, Item 9.
80. U. of T. Archives, Minutes of the meeting of the Faculty of Medicine Committee on Postgraduate Studies (December 9, 1921), p.77. Accession No. A86-0027, reel 11.
81. Application form for fellowship in the American College of Surgeons submitted by William Fulton Gillespie on February 25, 1935. Provided by Dr. George Stephenson, Archivist, American College of Surgeons.
82. Interview with Mrs. Elspeth M. Staden, Dr. W. F. Gillespie's daughter, on 22 April 1997.
83. U. of T. Archives. Master of Surgery thesis of William Fulton Gillespie entitled "Bilirubinaemia", submitted April 1, 1929. Accession No. T79-0137 - (95)
84. U. of T. Archives. The minutes of the meeting of the School of Graduate Studies of June 3, 1929, p.2, state: "The subcommittee administering the regulations governing the degree of Master of Surgery reported that William Fulton

Gillespie had fulfilled the requirements of the University of Toronto and recommended his admission to the degree of Master of Surgery." Accession No. A81-0008, reel 2. Two days later W. F. Gillespie is included in the list of names of successful graduate students "adopted by that body (the Senate) as fulfilling the requirements for the Ch.M.

(minutes of the Senate of the University of Toronto, volume 15, June 5, 1929, p.479.)

85. U. of T. Archives. The minutes of the meeting of the School of Graduate Studies of December 12, 1930, p.44, state "At the meeting of the Council of the Faculty of Medicine held December 5 it was recommended "that the advanced degree in surgery offered to graduate students in the University should be Master of Surgery designated by "M.S." instead of "Ch.M. as at present." The subsequent motion was carried. Accession No. A81-0008, reel 2.

86. U. of T. Archives. The minutes of the Senate of the University record the recommendation of the Faculty of Medicine to that body that: "William Fulton Gillespie, M.B. Toronto, M.A. Alberta, be given the privilege of changing the designation of his Master of Surgery degree from Ch.M. to M.S." Dr. Gillespie received this graduate degree at the Convocation in June 1929. (Minutes of the Senate of the University of Toronto, volume 16, February 13, 1931, p. 262.)

87. For the names of students registered for the Ch.M. degree at the University of Toronto between 1923 and 1927 see reference no.64. In order to determine whether students other than W.F. Gillespie were successful in completing the course and graduating with the Ch.M. degree, the minutes of the meetings of the Board of Graduate Studies were reviewed from the meeting of December 21, 1921 to June 3, 1929. Gillespie was the only name identified. Even Dr. W.A. Dafoe of Madoc, who registered for the course annually from 1923 to 1925, does not appear to have completed all the requirements for the degree, at least by 1929.
88. D. Sclater Lewis, *The Royal College of Physicians and Surgeons of Canada: 1920-1960* (Montreal: McGill University Press, 1962), p.28
89. Ibid, p.224.
90. Ibid, p.47.
91. Ibid, p.49 regarding additional Charter Fellows. Total 242 less the 22 admitted prior to the January 1931 letter. In W.F. Gillespie's file in the Royal College Archives is a copy of his letter of 2 June 1931 to Dr. T.C. Routley in which he states: "I was more than grateful to receive by recent mail your letter informing one of the approval of my application for the Fellowship."

92. U. of A. Archives, University of Alberta Calendar 1931-32, P. 18. Accession No. LE-3-A6g. 1931-1932.
93. University of Alberta Hospital Archives, University of Alberta Hospital Annual Report for 1931, for the period 1 April 1930 to 31 March 1931. Made available by Ms. Barbara Johnston, cultural coordinator Friends of University (of Alberta) Hospitals and acting archivist, University of Alberta Hospitals.
94. Announcement Card contained in William Fulton Gillespie's personal file at the Royal College of Physicians and Surgeons of Canada.
95. Interview with Mr. William A. Gillespie, Dr. W.F. Gillespie's son, on 21 April 1997.
96. For obituaries on William Fulton Gillespie see reference no.18. In order to obtain additional information on Dr. Gillespie's period in London correspondence was initiated with St. Mark's Hospital but the letter was returned since this hospital has apparently ceased to exist as a result of restructuring under the National Health Service.
97. U. of A. Archives, University of Alberta Calendar, 1939-40, p.204. Accession No. LE-3-A6g 1939-1940.

98. Annual Report of the University of Alberta Hospital, 1939, p.29. McGugan, The First Fifty Years: A History of the University Hospital: 1914-1964, p.49-50.
99. Interview with Mrs. Allan Day, widow of Dr. W. Fulton Gillespie on 26 July 1965. Mrs. Day stated: "He was first found to be a diabetic in 1933 and seemed particularly difficult to control ..... although it seldom incapacitated him nor did it interfere with his duties." In University of Alberta Hospital Chart No. 9777 on Dr. W. Fulton Gillespie, there is no mention of diabetes mellitus during a hospital admission in May, 1933. On a subsequent admission in September 1941, diabetes mellitus is noted among the Diagnoses on Discharge but the date of onset is not recorded.
100. According to McGugan, The First Fifty Years: A History of the University of Alberta Hospital: 1914-1964, pp.7-9, the original Strathcona hospital of 1914 had a potential bed capacity of 150 to which the erection of the Soldiers' Civil Re-establishment wing (referred to as the Wells' Pavilion) in 1923 added 85 beds. Finally, with the opening of the "south wing" of the hospital, in 1930, which added an additional 122 beds, the total bed capacity was brought to 357 prior to the outbreak of the Second World War in 1939.
101. Annual Reports of the University of Alberta Hospital



Admissions to the Surgican Service increased from 5,729 in 1939 (Report of 1941) to 11,388 in 1949 (Report of 1949). Total operations performed increased from 3,259 in 1940 (Report of 1943) to 6,138 in 1949 (Report of 1949).

102. McGugan, The First Fifty Years: A History of the University of Alberta Hospital: 1914-1964, p.9.
103. Annual Reports of the University of Alberta Hospital. Major surgery accounted for 941, and minor surgery for 2,318, operations in 1940 (Report of 1943) while major surgery accounted for 2,183, and minor surgery for 3,955, operations in 1939 (Report of 1949).
104. Annual Report of the University of Alberta Hospital for 1949, p.35.
105. Annual Reports of the University of Alberta Hospital. Charity patients admitted to hospital numbered 1,357 and patients admitted from the Out-Patient Department 816 in 1940 (Report of 1942) while charity patients admitted to hospital had dropped to 203 and Out-Patient admissions had dropped to 179 by 1949 (Report of 1949). These figures represent all such admissions, not just to the Department of Surgery.
106. Annual Report of the University of Alberta Hospital for

1945, p.26.

107. Annual Report of the University of Alberta Hospital for 1941, p.21.
108. Robert A. Macbeth and Walter C. MacKenzie, "The Use of Private Patients in Medical Education", Journal of Medical Education, 36 (1961): 359-363.
109. John W. Scott, The History of the Faculty of Medicine of the University of Alberta: 1913-1963, p.31.
110. Alberta Medical Bulletin, Volume 1, No.5. April 1936 to Volume 15, No. 1, January 1950. Available in the John W. Scott Library of the University of Alberta.
111. Alberta Medical Bulletin, Volume 6, No.1. January 1941 to Volume 14, No. 4, October 1949. Members and chairmen of the Education Committee of the Alberta Division of the Canadian Medical Association were always appointed at the Annual Meeting held late in the fall of the year, although the appointments may not appear in print in the Bulletin until the first issue of the following year. Also, based on the identity of the individual giving the report of the Committee as its chairman, one can assume that the chairman is listed first in the list of members. It is based on these two assumptions that Gillespie's term of office has

been established.

112. Both surviving Gillespie children (see reference No.21) stated their father and mother were very religious, went to church regularly, and that their father read his bible every night. Since this seemed out of character for one who was prone to use rather earthy aphorisms, I tried the stories quoted here on the Gillespie children. Both agreed that they could associate such stories with their father although they were quite definite that he would never "take the Lord's name in vain".

113. All these papers are single author publications by William Fulton Gillespie.

"A Vaseline Bottle in the Rectum," Canadian Medical Association Journal (CMAJ), 31 (1934): 302

"Doctors and Music," CMAJ, 33 (1935) 676-679

"Spontaneous Rupture of a Strangulated Hernia. CMAJ, 36 (1937): 621.

"The Clinical Problem of the Nodular Breast," CMAJ, 37 (1937): 555-558.

"The Interpretation of Abdominal Pain," CMAJ, 44 (1941):

562-569

"The Treatment of Perianal Abscess and Fistula," CMAJ, 47  
(1942): 547-551.

"Physiological Principles in the Repair of Inguinal Hernia,"  
CMAJ, 49 (1943): 29-33.

"The Training and Rewards of the Physician," The Diplomats,  
19 (1947): 37-42.

"The Diagnosis of Colonic Cancer," Alberta Medical Bulletin,  
14 (1949): 14-16.

114. W. Fulton Gillespie, "The Clinical Problem of the Nodular  
Breast," Canadian Medical Association Journal, 37 (1937): p.  
555.

115. W. Fulton Gillespie, "Doctors and Music," Canadian Medical  
Association Journal, 33 (1935): p. 679.

116. W. Fulton Gillespie, "The Training and Rewards of the  
Physician," The Diplomat, 19 (1947): P. 39-40.

117. Lewis, The Royal College of Physicians and Surgeons of  
Canada: 1920-1960, p.75.

118. N. Tait McPhedran, Canadian Medical Schools: Two Centuries of Medical History: 1822 to 1992 (Montreal: Harvest House, 1993), p.21-32.

119. In 1920, even before the faculty went to a full six-year M.D. degree program, an eight-year combined course leading to the degree of B.A., M.D. was offered. (see University of Alberta Calendar, 1920-21, p.67.) This innovation had, however, no impact on the teaching of the Department of Surgery. The duration of these courses, as listed, was based on entry into the course following grade XI. Students entering the University from grade XII started in the second year of the course with the result that, for both the M.D. and the B.A.,M.D., the total duration was reduced to five and seven years respectively. In 1940 a number of major changes were made in the medical curriculum. The combined B.A.,M.D. program was discontinued and replaced by a combined B.Sc.,M.D. program which became the only means of entrance into the M.D. program except for students already in possession of a bachelor's degree. Grade XII was now a requirement for entry. Following the first two years of the combined program in the Faculty of Arts and Sciences the student entered the redesignated first year of a five-year medical program. The latter consisted of two years of basic medical sciences, two years of clinical sciences and a final year of undergraduate internship prior to medical graduation. This compressed the formal surgical teaching

exclusively into the new third and fourth years but the teaching load remained much as before. (Corbet, *Frontiers of Medicine*, p.147-148.) The final curriculum change during the Gillespie years occurred in 1948 when the undergraduate internship was dropped and the M.D. degree was granted at the end of a four year program. (Corbet, *Frontiers of Medicine*, p.148.)

120. Corbet, *Frontiers of Medicine*, p.56-59.

121. *Ibid*, p.71.

122. Letts, *The Edmonton Academy of Medicine*, p.13.

123. *Alberta Medical Bulletin*, Vol.1, No.7 (1936). Gillespie is listed as president on page 1 and is pictured on page 5. In Vol.2, No.9 (1937) Gillespie reported to the Alberta Division on page 14 and his Retiring President's Report is carried on page 4 of Vol.2, No. 11 (1937).

124. McGugan, "Dr. W. Fulton Gillespie (Obituary)" *Canadian Medical Association Journal*, 62 (1950):208-209. See Macbeth, "Alexander Russell Munroe: 1879-1965," *Canadian Journal of Surgery*, 10 (1967): p.6-7 regarding the origins of the Western Association of Clinical Surgeons. It now goes under the name of the Western Division of the Canadian Association of Clinical Surgeons.

125. Lewis, The Royal College of Physicians and Surgeons of Canada: 1920-1960, p.213.
126. Ibid, p.120-127 provides a summary of the deliberations of the Council of the College on this subject.
127. Royal College of Physicians and Surgeons of Canada, minutes of the meeting of Council on November 25 and 26, 1948.
128. David A.E. Shephard, The Royal College of Physicians and Surgeons of Canada: 1960-1980, (Privately Printed at Ottawa by The Royal College of Physicians and Surgeons of Canada, 1985) p.194.
129. Royal College, minutes of the meeting of Council on June 17 and 18, 1949 and President's Annual Report on Behalf of Council at the Annual Business Meeting of the College on November 25 and 26, 1949, p.14.
130. Royal College, minutes of the meeting of Council on June 22, 1948.
131. Ibid, meeting of 24 November 1949.
132. Ibid, meeting of November 25 and 26, 1948.
133. Royal College, minutes of the Annual Business Meeting on

October 25, 1941.

134. Royal College, minutes of the meeting of Council on June 17 and 18, 1949.
135. Authorship Committee Department of Cancer Control Canadian Medical Association, Handbook on Cancer for the Medical Profession (Privately Printed, 1938), p.55-57.
136. Michael B. Shimkin, Contrary to Nature, (Washington: United States Department of Health, Education and Welfare, 1977), p.429-434.
137. Robert A. Macbeth, "Deviation into the Right Direction (Reminiscences of an Alumnus)." Iatros: The University of Alberta Medical Journal 10 (1995-1996): 24-28.
138. Attachment to letter from Dr. E.P. Scarlett to Mrs. W.F. Gillespie dated May 3, 1956. In Scrapbook of W.F. Gillespie in the possession of the Department of Surgery, University of Alberta.
139. Telegram from Dr. John W. Scott, Edmonton, to Dr. John Plunkett, Honorary Secretary of the Royal College of Physicians and Surgeons of Canada, Ottawa, advising of the death of W.F. Gillespie on 3 December 1949. Included in Dr. Gillespie's personal file at the Royal College.



140. "Dr. William Fulton Gillespie," Extract from Minutes of Council of the Royal College of Physicians and Surgeons of Canada, June 23, 1950. Included in Dr. Gillespie's personal file at the Royal College.

[illegible]

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